

h21 000382216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

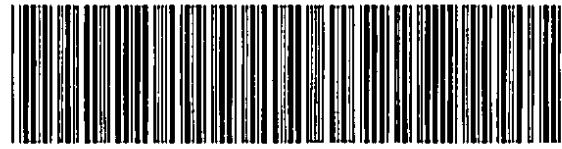
(Document Number)

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*RA Change*

DEC 05 2022

D CUSHING

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: IN Color Printing, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Victor E. Monteiro

Name of Person

Incolorprinting

Firm/Company

156 Seneca Point Trail

Address

Kissimmee, FL 34746

City/State and Zip Code

incolorprinting2021@gmail.com

E-mail address: (to be used for future annual report notification)

2022 NOV -7 AM 8:24

For further information concerning this matter, please call:

Victor E. Monteiro

Name of Person

at ( 904 ) 661-8220

Area Code & Daytime Telephone Number

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy



RECEIVED  
2022 NOV -7 PM 12:23

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 24, 2022

VICTOR E MONTEIRO  
IN COLOR PAINTING LLC  
156 SENECA POINT TRAIL  
KISSIMMEE, FL 34746

SUBJECT: IN COLOR PAINTING LLC  
Ref. Number: L21000382216

We have received your document for IN COLOR PAINTING LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 722A00023856

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: IN COLOR PAINTING, LLC

2. (a) 156 Seneca Point Trail FL. (b) 156 Seneca Point Trail
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)
Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

3. August 26 2021 Date of filing/registration in Florida
4. L21000382214 Document number

5. (a) Victor E. Monteiro
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
156 Seneca Point Trail FL. 34744
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Kissimmee, FL 34744

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Monteiro Victor Emmanuel TAVORES
NEW Registered Office Address:
156 Seneca Point Trail
Kissimmee, FL 34744

2022 NOV -7 AM 8:24

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Victor E. Monteiro
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent