125000069588

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BUILDE 11924 BIB 4400.05

SB 10/22/25

COVER LETTER

TO: Registration Section Division of Corporations

AFFORDA SUBJECT:	ABLE LINE STRIPING LLC			
<u></u>	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	OLGA C SCHWEISGUTI	4		
	·	Name of Person		
	AFFORDABLE LINE ST	RIPING LLC		
		Firm/Company		
	2118 OPERC DRIVE		<u>.</u>	
		Address		કૃત્વેહ
	WINDERMERE FLORID	А 34786		Mus 255 - 5
	WILLIAM@AFFORDABI	City/State and Zip Code JELINESTRIPING.COM		5 E. H. S
	E-mail address: (to be used for future annual report notif	lication)	
For further information of	concerning this matter, please co	all:		
WILLIAM SCHWEISG	UTH	689 465-5876		
Name (of Person	at () Area Code Daytime	e Telephone Number	
linelosed is a check for t	he following amount:			
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filin Certificate of Certified Co (additional cor	of Status & opy

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ACTORDADEL EINT, STRICTING LEC		
(<u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company wo Florida document number <u>L25000069588</u> .	ere filed on <u>02/10/2025</u>	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	t <u>y company here</u> :	
AFFORDABLE LINE STRIPING AND SERVICES LLC		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		20
(Principal office address MUST BE A STREET ADDRESS)		.n
The space with the property of the state of	-	<u>S</u>
-	•	7
		- T1
Enter new mailing address, if applicable:		<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
		-1
3. If amending the registered agent and/or registered office adorgent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	dress on our records, <u>enter the name o</u>	f the new regi
New registered Office Address.	Enter Florida street address	
	P1. 33	
	, Florida	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

A DECARDA DE LE LIMBE CEDIDINIO: LE C.

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.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	WILLIAM J SCHWEIGUTH	2118 OPERC DRIVE	
		WINDERMERE FL 34786	≣Remove
			□Change
MGR	OLGA C SCHWEISGUTH	2118 OPERC DRIVE	≣ Add
		WINDERMERE FL 34786	
			LlChange
AMBR	WILLIAM J SCHWEISGUTH	2118 OPERC DRIVE	■Add
		WINDERMERE FL 34786	∐Remove
			Remove
			Ll Add
			∐Remove
			□Remove
			☐Change

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