

LD6 00000 3764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

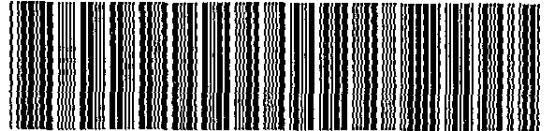
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300065339933

02/09/08--01043--001 **25.00

FILED
06 FEB -9 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOP NOTCH PAINTING, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TROY REED

(Name of Person)

(Firm/Company)

10720 FAWN DRIVE

(Address)

NEW PORT RICHEY, FL 34654

(City/State and Zip Code)

For further information concerning this matter, please call:

RICHARD A BOYKO, EA

(Name of Person)

at (727) 861-2722

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
06 FEB -9 PM 2:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TOP NOTCH PAINTING, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on JANUARY 11, 2006 and assigned
document number L06000003764

SECOND: This amendment is submitted to amend the following:

PLEASE CORRECT THE PYHICAL ADDRESS OF THE ABOVE COMPANY TO:

6212 SARDINIA AVE.

SPRING HILL, FL 34608

Dated JANUARY 11, 2006



Signature of a member or authorized representative of a member

TROY REED

Typed or printed name of signee

Filing Fee: \$25.00

RECEIVED
OFFICE OF THE
CLERK OF THE
STATE
TALLAHASSEE, FLORIDA

06 FEB -9 PM 2:43

FILED