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(Requestor's Name)
(Address)
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(Document Number)
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TALLAHASSEE, FLORIDA

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COVER LETTER

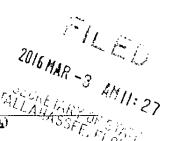
TO				
SU	Division of Corporations JOR PAINTING LLC WBJECT: Name of Limited Liability Company the enclosed Articles of Amendment and fee(s) are submitted for filing. lease return all correspondence concerning this matter to the following: RENIER ALONSO Name of Person JOR PAINTING LLC Firm/Company 8640 SW 207 TERRACE Address CUTLER BAY, FLORIDA 33189 City/State and Zip Code danrol@bcltsouth.nct			
		Name of Lin	aited Liability Company	
The	e enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Ple	ase return all correspo	ondence concerning this matter	to the following;	
		RENIER ALONSO		
			Name of Person	
		JOR PAINTING LLC		
			Firm/Company	
		8640 SW 207 TERRACE		Name of Person Firm/Company Address S189 Nity/State and Zip Code e used for future annual report notification) at (
			Address	
		CUTLER BAY, FLORIDA	A 33189	
			City/State and Zip Code	
		<u> </u>		
		E-mail address: (to be used for future annual report notifi	ication)
For	further information of	concerning this matter, please co	all:	
RE	NIER ALONSO			
	Name o	of Person	Area Code Daytime	Telephone Number
Enc	losed is a check for t	he following amount:		
8	\$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status		Certificate of Status & Certified Copy

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



JOR PAINTING LLC

(Name of the Limited Liability Company as it now appears on our records.)

amounty sampling,	TONY,
y were filed on 01/15/2016	and assigned
bility company here:	
pility Company." the designation "LLC" or	r the abbreviation "L.L.C."
office address on our records, <u>s</u> <u>re</u> :	enter the name of the
Enter Florida street address	
Civ , Ftoric	đaZiv Code
	bility company here: bility Company." the designation "LLC" of the des

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

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	MARTA ROLDAN	8640 SW 207 TERRACE CUTLER	■ Add
			□ Remove
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ective date, if other than the d	ate of filing:	(optional)	
effective date is listed, the date must b	e specific and cannot be prior to date of ti	lling or more than 90 days after filing.) Pursua	
e: It the date inserted in this bloc ument's effective date on the Dep		ory filing requirements, this date will not	GC HAROU E
		ective time, at 12:01 a.m. on the	earlier
he 90th day after the recor	d is filed.		
FEBRUARY 18	2016		
ed FEBRUARY 18	7		
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, not	•	sentative of a member	

Page 3 of 3

Filing Fee: \$25.00