

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Stat	us
Special Instructions to Filing Officer:	

Office Use Only



600316125466

07/25/18--01015--008 **25.00

SECRELARY OF STATE

COVER LETTER

Division of Cor		.4	
SUBJECT: X	Pert Painting, 11C		
	Oame of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u> </u>	Name of Person	
		Name of Person	
		Firm/Company	
	1995 PC	vson St Address	
	Naples	FL. 34120 City/State and Zip Code t Painting FL & Grace to be used for future annual report noti	
	× 0	teaintian Electron	i). (044
	i ₂ -mail address: (to be used for future annual report noti	tication)
For further information o	oncerning this matter, please c		
Yasmit	h Vidi	913 Ang-	וולונט
Name o	f Person	at (<u>913</u>) <u>909 -</u> Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

. Xpert Pai	nting. 1	lC		
(Name of the Limited (A	Liability Compar Florida Limited L	ny as it now appears on our reco liability Company)	rds.)	8
The Articles of Organization for this Limited Liab		were filed on <u>01/08/.</u>	2015	and assigned
This amendment is submitted to amend the follow	ing:		:	7
A. If amending name, enter the new name of the	he limited liabi	lity company here:		38 16 16 16 16 16 16 16 16 16 16 16 16 16
The new name must be distinguishable and contain the word	ds "Limited Liabil	ity Company." the designation "Li	LC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicab	ole:		. 1	
(Principal office address MUST BE A STREET	ADDRESS)	1995 Parson Naples F.L 3	ST Wan	
		Naples F.L 3	9120	
Enter new mailing address, if applicable:		1005 00 00		
(Mailing address MAY BE A POST OFFICE BO	<u>9X)</u>	1995 Parson		
		Naples F.L.	3412	.0
B. If amending the registered agent and/or registered agent and/or the new registered office			eds, <u>enter</u>	the name of the new
Name of New Registered Agent:	<u>Farid</u>	Yidi		
New Registered Office Address:	1995	Parson St Enter Florida street add	ress	
	Naple	es	Florida	34120
	<u> </u>	City	_ 	Zip Code

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>	Yasmith Yidi	1995 Parson St Naples FL	,⊠ Add
			□ Remove
			Change
			Add
			□ Remove
			Change
			□ Add
			18 PH 29 39 PH 39 39
		- 10 A	理中的地
		· · · · · · · · · · · · · · · · · · ·	_ □ Remove
			Change
			🗆 Add
			□ Remove
			Change
			_ Remove
			□ Change

			<u> </u>		
 					
·					
					
	··-				
		···-			
					75 6
					三型 岸 て
					SSE 25 1
					四年 200
	- -				PRIDA
					3 0
		<u></u> _	,		
iote: If the date	f other than the date listed, the date must be spinserted in this block dive date on the Department	oes not meet the ap	oplicable statutory	(or more than 90 days filing requirements	optional) after filing.) Pursuant to 605 s, this date will not be liste
	ifies a delayed effor after the record i		t not an effectiv	ve time, at 12:	01 a.m. on the earlie
ated 7/18	3/18		·		
·		Jacob Land	anthorized represent	ntive of a member	
		,	/		

Page 3 of 3

Filing Fee: \$25.00