I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH R FARINA

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 36-4778826

Name and Address of Current Registered Agent:

FARINA, JOSEPH R 4103 ROCKY FORK TER. ELLENTON, FL 34222 US

4103 ROCKY FORK TER ELLENTON, FL 34222

Current Mailing Address: 4103 ROCKY FORK TER ELLENTON, FL 34222 US

Current Principal Place of Business:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	FARINA, JOSEPH R	Name	FARINA , DOMINIC N
Address	4103 ROCKY FORK TER	Address	4103 ROCKY FORK TER
City-State-Zip:	ELLENTON FL 34222	City-State-Zip:	ELLENTON FL 34222

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT	
DOCUMENT# L14000017923	Ja
Entity Name: FARINA PAINTING COMPANY, LLC	Secr

FILED an 03, 2019 etary of State 7550221484CC

Date

Certificate of Status Desired: No

Date

01/03/2019