

W04000006623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Specializing in Detail 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:

Gabriel A. Marchionni
(Name of Person)

Marchionni Painting & Construction LLC
(Firm/Company)

1825 Catawba Cir., Apt. B
(Address)

Kissimmee, FL 34741
(City/State and Zip Code)

For further information concerning this matter, please call:

Gabriel A. Marchionni at (407) 319-9512
(Name of Person) (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)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Specializing in Detail Painting, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on Jan 26, 2004 and assigned document number L04000006623.

SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

ARTICLE I: The name of the Limited Liability Company is:
Marchionni Painting & Construction LLC

ARTICLE IV: The name and Florida street address of the Registered Agent is:
Gabriel A. Marchionni, 1825 Catawba Cir., Apt. B, Kissimmee, FL 34741

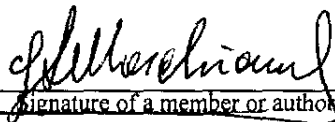
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: Gabriel A. Marchionni

ARTICLE V: The name and address of managing members/managers are:

Title: Manager
Gabriel A. Marchionni
1825 Catawba Cir., Apt. B
Kissimmee, FL 34741

Dated March 7, 2005.



Signature of a member or authorized representative of a member

Gabriel A. Marchionni

Typed or printed name of signee

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA