

L04000059394

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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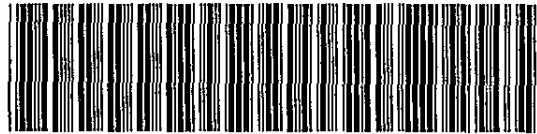
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(Business Entity Name)

(Document Number)

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## TRANSMITTAL LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: WELL PAINTED, 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:

JOHNNY ABREU  
(Name of Person)

WELL PAINTED, LLC  
(Firm/Company)

220 ALEXANDRIA PLACE DRIVE  
(Address)

APOPKA FL 32712  
(City/State and Zip Code)

For further information concerning this matter, please call:

JOHNNY ABREU at (407) 889-7924  
(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

WELL PAINTED, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The Articles of Organization were filed on AUGUST 11-2004 and assigned document number 204000059394

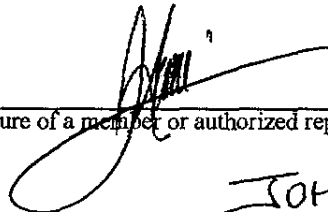
**SECOND:** The following amendment(s) to the Articles of Organization was/were adopted by the limited liability company:

FREDDY VALDEZ HAS RESIGN AS A MANAGING  
MEMBER OF THIS ORGANIZATION

ALSO IMMEDIATELY  
CRISTINA CABA

AT 220 ALEXANDRIA PLACE DR. APOKA FL 32710  
HAS BEEN ADMITED AS A NEW MANAGING MEMBER

Dated OCTOBER 7, 2004.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

JOHNNY ABREY  
\_\_\_\_\_  
Typed or printed name of signer

Filing Fee: \$25.00