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J. BRYAN

SEP - 3 7010

EYMMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJEÇT: <u>Kim</u>	75 Parming LLC Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
·		Name of Person Paintine LL C Firm/Company	10 SEP
	262	Belave dr. Address	FILED SEP -2 MII: 25 CREINSSEE, FLORIDA CREINSSEE
	Buar	City/State and Zip Code AINTINGE Knology- to be used for future annual report for first	FI. 25
	E-mail address (an line kno logy- to be used for future annual report lod fice	NET
For further information	concerning this matter, please of		
<u>James</u> to	of Person	at (850) 249-20 Area Code & Daytime T	S 20 Felephone Number
Enclosed is a check for t	the following amount:		•
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	W.G. A.D.D.D.G.		

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

King's Painting (4	
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our nited Liability Company)	records.)
The Articles of Organization for this Limited Liability Con	mpany were filed on	3/2056 and assigned
Florida document number <u>LO6000014227</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company here:	
The new name must be distinguishable and end with the words 'L.L.C."	"Limited Liability Company," the d	esignation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		SEC
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
		SS 2 M
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		Ber 25
·		
B. If amending the registered agent and/or registeregistered agent and/or the new registered office address		ds, enter the name of the new
ø		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		Florida
	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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager of Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Ma	naging Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Cossey Henderson	262 Belaire Dr. Pawwa City Beach Fl. 32413	<mark>X</mark> Add Remove
<u>mgrm</u>	Roy Mullis	262 Belaine Dr. Pavano City Beach Fl. 32413	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change		FILED 10 SEP -2 MII: 25 SECREMENT STATE SECREMENT STATE
-	Oame	or authorized representative of a member	

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Filing Fee: \$25.00