

LD6000076589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000085625970

01/29/07--01010--016 **25.00

FILED
07 JAN 29 AM 10:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. C. 2007 JAN 30 2007

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Practical 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:

Mark Alvarez

(Name of Person)

(Firm/Company)

P.O. Box 341003

(Address)

Tampa, FL. 33694

(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Alvarez

(Name of Person)

at

(813)

598-8026

(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)

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

FILED

07 JAN 29 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Practical Painting, LLC.

(Present Name)

(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 8/3/06 and assigned
document number L06000076589.

SECOND: This amendment is submitted to amend the following:

I would like to change the name from
Practical Painting, LLC. to Spray Mates, LLC.

Dated January 26, 2007.

Mark Alvarez

Signature of a member or authorized representative of a member

Mark Alvarez

Typed or printed name of signee

Filing Fee: \$25.00