

L08000048101

(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

B. KOHR

JUN -1 2012

EXAMINER



100235452201

05/25/12--01021--006 **25.00

12 MAY 25 PM 1:12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 29, 2012

PABLO ARNAUD
RED BRUSH SERVICES OF FLORIDA
14350 NEW BLOSSOM LANE
WINTER GARDEN, FL 34787

SUBJECT: ARNA BUILDING SERVICES LLC
Ref. Number: L08000048101

We have received your document for ARNA BUILDING SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L11000083087

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 012A00015439

Kohr, William "Buck"

From: Pablo Arnaud <parnaud373@hotmail.com>
Sent: Friday, June 01, 2012 12:54 PM
To: Kohr, William "Buck"
Cc: gentkumi@gmail.com
Subject: Red Brush Services of Florida LLC

Mr. Kohr,

The owner of Red Brush, Mr. Gent Kumi, and I have partnered to expand Services and operations Statewide using my State Building License (CBC 1258732). Therefore, it is my intention to change the name of my existing LLC, arna building Services LLC, to Red Brush Services of Florida LLC. Upon its approval, I will be transferring my state Building license through D BPR.

Shall you have any questions, please do not hesitate to contact me at 787 662 4452 or parnaud373@hotmail.com

Thanks in advance for Your help on this matter.

Pablo Arnaud

12 MAY 25 PM 1:10

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: arna building services 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:

Pablo Arnaud

Name of Person

Red Brush Services of Florida

Firm/Company

14350 New Blossom Lane

Address

Winter Garden, Fl. 34787

City/State and Zip Code

parnaud373@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pablo Arnaud

Name of Person

at (787) 662-4452

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

12 MAY 25 PM 1:12

6/01/12.

CORPORATE DETAIL RECORD SCREEN

12:35 PM

NUM: L11000083087 ST:FL ACTIVE/FL LIM LIAB FLD: 07/19/2011

TOTAL CONTR: 0.00 FEI#: 27-3621422

NAME : RED BRUSH SERVICES, LLC

PRINCIPAL: 831 BERKELEY ST.

ADDRESS BOCA RATON, FL 33487 US

RA NAME : DARDAN INDUSTRIES

RA ADDR : 831 BERKELEY ST

BOCA RATON, FL 33487 US

ANN REP : (2012) W 04/18/12

6/01/12

MANAGER/MEMBER DETAIL SCREEN

12:36 PM

CORP NUMBER: L11000083087 CORP NAME: RED BRUSH SERVICES, LLC

TITLE: MGRM NAME: DARDAN INDUSTRIES

831 BERKELEY ST.

BOCA RATON, FL 33487

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

arna building services LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

12 MAY 25 PM 1:12

The Articles of Organization for this Limited Liability Company were filed on 5/14/2008 and assigned
Florida document number LO8000048101

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Red Brush Services of Florida LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N/A

New Registered Office Address:

N/A

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated

5/24/12

Signature of a member or authorized representative of a member

PABLO ARNAUD

Typed or printed name of signee