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| (Requestor's Name) | | | | |
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| (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: | | | | |
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Office Use Only



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SECRETARY OF STATE

T. CLINE

OCT 10 2008

EXAMINER

COVER LETTER

| TO: , Registration Section Division of Corporations |
|--|
| SUBJECT: NAGAPOOLLAY 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: |
| Errol NAGAPOOLLay (Name of Person) |
| NAGAPOOLLAY Painting LLC. (Firm/Company) |
| 14 Pine Trace Loop (Address) |
| 14 Pine Trace Loop (Address) Ocala, Florida 34472 (City/State and Zip Code) |
| For further information concerning this matter, please call: From I Nagarooo I ay 352, 680 - 8100 |
| For further information concerning this matter, please call: Errol Nagapoollay (Name of Person) (Area Code & Daytime Telephone Number) Frelesed is a check for the following amount: |
| Enclosed is a check for the following amount: |
| \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) 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

| Florida document number <u>L08000088740</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: | d assigned |
|--|------------------|
| The Articles of Organization for this Limited Liability Company were filed on Sept 18, 2008 and Florida document number <u>L08000088740</u> . This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: | d assigned |
| A. If amending name, enter the new name of the limited liability company here: | |
| | |
| | |
| ERROL'S Painting LLC. | , |
| The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or "L.L.C." | the abbreviation |
| Enter new principal offices address, if applicable: | , |
| (Principal office address MUST BE A STREET ADDRESS) | 2008 |
| | <u>8 T</u> |
| 2. The second se | |
| Enter new mailing address, if applicable: | O I |
| (Mailing address MAY BE A POST OFFICE BOX) | |
| 27. A. | o |
| | |
| B. If amending the registered agent and/or registered office address on our records, enter the nan registered agent and/or the new registered office address here: | ne of the nev |
| 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

| MGR = M MGRM = | lanåger Managing Member | | | |
|---------------------|---|---|--|---|
| <u>Title</u> | Name | Address | Type of A | <u>ction</u> |
| | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| | | | Add Remove | |
| D. If ame | nding any other information, enter change | (s) here: (Attach additional sheets, if necessary.) | 2000 OC | *************************************** |
| - Dated <u>(</u> | October 3rd, 20 | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | 15. THE PROPERTY OF THE PROPER | |
| | Errol S. NAGH | or authorized representative of a member APOULLAY or printed name of signee | | |

Page 2 of 2

Filing Fee: \$25.00