

L09000056542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

(Business Entity Name)

(Document Number)

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S. YOUNG

17 FEB 27 AM 9:43

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 28, 2017

BRUCE C SLIVINSKI II
BRUCE C SLIVINSKI II, LLC
1030 VERNON LOOP
OVIEDO, FL 32765

SUBJECT: BRUCE C. SLIVINSKI, II, LLC
Ref. Number: L09000056542

FILED STATE
SECRETARY OF FLORIDA
TALLAHASSEE, FL
17 FEB 27 AM 10:19

We have received your document for BRUCE C. SLIVINSKI, II, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

BC PAINTING, INC - P11000048195

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.

Shelia H Young
Regulatory Specialist II

Letter Number: 017A00003850

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bruce C. Slivinski II 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:

Bruce C Slivinski II
Name of Person

Bruce C. Slivinski II, LLC
Firm/Company

1030 Vernon Loop
Address

Oviedo FL 32765
City/State and Zip Code

Bslivinskipainting@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce Slivinski at (407) 470-4021
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)

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 FEB 27 AM 9:43

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

Bruce C. Slivinski LLC

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

The Articles of Organization for this Limited Liability Company were filed on 06/10/2009 and assigned Florida document number LD9000056542

This amendment is submitted to amend the following:

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

Painting by BCS, LLC

The new name must be distinguishable and contain the words "Li-

pany," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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:

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized 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"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA
FEB 27 3 19:43

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11/17/2011 BY 60322
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
17 FEB 27 AM 9:43

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated February 1st, 2017

Signature of a member or authorized representative of a member

Bruce Shrivinski *JS*
Typed or printed name of signee