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MAR 0 2 2016 J. HARRIS

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Barney's Painting of Okalcosa County U
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Barney Name of Person
Firm/Company
Land was to the second
Crestview FL 32539
City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (850) 82(0 - 1140)  Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed).
(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 ARTICLES OF ORGANIZATION OF

Karneu's Paint	ring of Ok	alcosa Cou	intu.LL
( <u>Namelof the Limited Liabilit</u> (A Florida	y Company as it now appears of Limited Liability Company)	our records.)	- J'
The Articles of Organization for this Limited Liability Co	omnany were filed on 10	110/2009 and	assigned
Florida document number L 090009648		did and	assigned
	<b>─'</b> \\``		•
This amendment is submitted to amend the following:		,	;
A. If amending name, enter the new name of the limit	ted liability company here:		
The new name must be distinguishable and contain the words "Limit	tod Tickillar Common "Abo design	matica WTC" and hand Landation	6T T (2.2)
	ted classiffy Company, the desig	nation LLC of the appreviation	L.L.C.
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR.	ESS)	<u> </u>	<del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del> <del>_</del>
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		声量	N THE STATE OF THE
Enter new mailing address, if applicable:			9
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	7
Kirali - Alberta i A			
		E S	<del></del>
B. If amending the registered agent and/or regist		r records, <u>enter the nam</u>	ie of the new
registered agent and/or the new registered office addr	ess here:		
and the state of t			•
Name of New Registered Agent:	·		
New Registered Office Address:			
	Enter Florida	street address	
		Florido	
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New Registered Agent's Signature, if changing Registered Agent:

Thereby 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

MGR = M $AMBR = A$	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action:
AMBR	Travis Barney	4263 Hicks Rd	∕∕O∖add
	,	Crestview, FL 3	2539□ Remove
			☐ Chánge
AMBR	Brandon Barney	4263 Hicks Ro	_ <b>⊠</b> Add
	J	Crestview, Fl 3	2.53 A Remove
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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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