

L 10000/09656

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Quantum 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:

Kevin Engstrom

Name of Person

Owner of Quantum Painting LLC

Firm/Company

3471 Jade Lane

Address

Mulberry Fl 33860

City/State and Zip Code

pinstr4car@gmail.com

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

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Kevin Engstrom

Name of Person

at (**863**) **286-8556**

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**

Quantum Painting 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 12/13/2012 and assigned
Florida document number L10000109656.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

1502 Boone Place

Lakeland FL 33803

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

4798 S. Florida Ave. #155

Lakeland, FL 33813

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:

Breanna Kell

New Registered Office Address:

1502 Boone Place

Enter Florida street address

Lakeland

City

, Florida 33803

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.

Breanna Kell

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>
<u>mgrm</u>	<u>Kevin Engstrom</u>	<u>3471 Jade Lane</u>	<input type="checkbox"/> Add
		<u>Mulberry Fl 33860</u>	<input checked="" type="checkbox"/> Remove
<u>mgrm</u>	<u>Jeanne Engstrom</u>	<u>3471 Jade Lane</u>	<input type="checkbox"/> Add
		<u>Mulberry Fl 33860</u>	<input checked="" type="checkbox"/> Remove
<u>mgrm</u>	<u>Breanna Kell</u>	<u>1502 Boone Place</u>	<input checked="" type="checkbox"/> Add
		<u>Lakeland Fl 33803</u>	<input type="checkbox"/> Remove
<u>mgrm</u>	<u>Jesse Kell</u>	<u>1502 Boone Place</u>	<input checked="" type="checkbox"/> Add
		<u>Lakeland Fl 33803</u>	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

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

Dated December 13, 2012.

Kevin Engstrom

Signature of a member or authorized representative of a member

Kevin ENGSTROM

Typed or printed name of signee

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Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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