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S. WARREN DEC 2 0 2017

COVER LETTER

TO:	Registration So Division of Cor			
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SUBJEC	, ; <u> </u>	Name of Lin	nited Liability Company	
		Amendment and fee(s) are sub	-	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		Sonya L Lancy		
			Name of Person	
		Sonya L Laney CPA PA		
			Firm/Company	
		5131 S Ridgewood Ave Si	e F	
			Address	
		Port Orange, FL 32127		
			City/State and Zip Code	
		slaney@sonyalaney.com		· · · · · ·
For furth	er information o	encerning this matter, please c	to be used for future annual report notifi all:	ication)
Mark Hi	imphrey		407 970-9297	
Name of Person			at () Area Code Daytime	Telephone Number
Enclosed	l is a check for t	he following amount:		
■ \$25.0	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:

TO:

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

Color Concepts/Galeana Painting & Drywall 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 $\frac{11/03/2010}{1}$ and assigned Florida document number L10000114270 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 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 Page 1 of 3

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>	Name	Address	Type of Action
mgr	Galeana, Jesus	604 23rd Ave NE	
		Birmingham, AL 35215	■ Remove
			☐ Change
mgrm	Humphrey, Mark	700 Hammett Lane	_ Add
		New Smyrna Beach, FL 32168	□ Remove
		- 	Change
			D Add
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				optional (optional)
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