LIMOUDUTSS

(Re	questor's Name)	_
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(Cit	ty/State/Zip/Phone	= #)
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D.C.

COVER LETTER

Division of Co	orporations				
Painite SUBJECT:	Services Global LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corresp	oondence concerning this matter	to the following:			
	David Carmena				
		Name of Person			
	Painite Services Glo	bal LLC			
		Firm/Company			
	201 E. Kennedy Blv	d Ste 950			
		Address			
	Tampa FL 33602				
		City/State and Zip Code			
	DavidCarmena@Hot				
	E-mail address: (to be used for future annual report not	ification)	2 2	
For further information	concerning this matter, please ca	all:		AUT WOA	
David Carmena		813 334-6076	5	0V -3	
Name	of Person	//	ne Telephone Number	3 PH	
Enclosed is a check for	the following amount:			STATE STATE ORIDS	Ö
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &	

TO:

Registration Section

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

Painite Services Global I.I.C.

Name of the Limited Liebility Commo		
(Name of the Limited Liability Compa (A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L11000006758	were filed on 01/18/2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	<u>ility company here</u> :	
The new name must be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	201 E. Kennedy Blvd Ste 950	
(Principal office address MUST BE A STREET ADDRESS)	Tampa FL 33602	
Enter new mailing address, if applicable:	201 E. Kennedy Blvd Ste 950	
(Mailing address MAY BE A POST OFFICE BOX)	Tampa FL 33602	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>e</u> :	the name of the ne
	, Florida	
Nov. Degistered Agent's Cignotines if shoughs Degistered Agent	City	
New Registered Agent's Signature, if changing Registered Agent:		[1] [1]

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	David Carmena	1208 E Kennedy Blvd ste 231	
		Tampa FL 33602	Remove
			
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	****		Add
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•	nge(s) here: (Attach additional sheets, if necessary.
	<u> </u>
ffective date, if other than the date of filing: he effective date must be specific, cannot be prior to date of	
e date this document is filed by the Florida Department o	
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