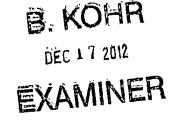
# L11000008350

(Ře	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #	9
PICK-UP	☐ WAIT	MAIL
(Вс	usiness Entity Name	)
(De	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
		P

Office Use Only





100242289581

12/14/12--01003--024 \*\*30.00

12 DEC 14 PH 12: 02
SECRETARY OF STATE
ALL AHASSEE, FLORIDA

#### **COVER LETTER**

TO:

Registration Section Division of Corporations

SUBJECT

## DELOACH'S PAINTING PLUS 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:

# MICHAEL E DELOACH OWNER

Name of Person

#### DELOACH'S PAINTING PLUS LLC

Firm/Company

## 2703 NORTH EAST AVENUE

Address

PANAMA CITY, FL 32405

City/State and Zip Code

mEnelouch 69@ Yahoo.com

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

For further information concerning this matter, please call:

MICHAEL E DELOACH

Name of Person

at (80) 630 - 652D

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)

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 ARTICLES OF ORGANIZATION OF

#### **DELOACH'S PAINTING PLUS LLC**

ARTICLES C	OF AMENDMI	ENT
	TO	A
ARTICLES O		TION
	OF	S LLC  Pears on our records.)  Years on our records.
DELOACH'S PA	AINTING DI LI	SUC
(Name of the Limited Liability Co (A Florida Limi		pears on our records.)
(A Florida Limi	ited Liability Compan	(v)
The Articles of Organization for this Limited Liability Comp	pany were filed on	04/00/0044 %0%
Florida document number L11000008350	-	<b>4</b>
Tiorida document italiaesi		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company	<u>here</u> :
The new name must be distinguishable and end with the words "L.L.C."	Limited Liability Cor	mpany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES		•
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		n our records, enter the name of the new
registered agent and or the new registered office address	3 1101 0.	
Name of New Registered Agent:		
	(*************************************	
New Registered Office Address:		Enter Florida street address
	City	, Florida Zip Code
	City	Lip Cout

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.

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>	Name	Address	Type of Action
MGRM	JAMES R NOLAN	2703 NORTH EAST AVENUE	Add
		PANAMA CITY, FL 32405	Remove
			_ □
			Add
<del></del>			Add
			Remove
			Add
			Remove
		<del></del>	— Add
			Remove
			Add
			Remove

DECEMBER 11	2012
Michael &	Deloch
Signature o	of a member or authorized representative of a member

Filing Fee: \$25.00