L11000116593

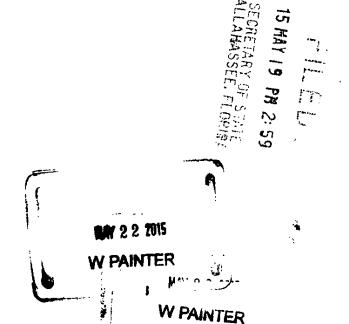
(Re	questor's Name)
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COVER LETTER

TO:			Sp. s		
CUDIE					
SORTE	CI:		ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please r	eturn all correspo	ndence concerning this matter	to the following:		
		RM UNIVERSAL PAINTING LLC Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. all correspondence concerning this matter to the following: RAUL E RAMOS Name of Person RM UNIVERSAL PAINTING LLC Firm/Company 421 S. WOODLAND ST Address WINTER GARDEN, FL 34787 City/State and Zip Code MINNIE7@YMAIL.COM E-mail address: (to be used for future annual report notification) Formation concerning this matter, please call: DS at (352) 874-6622 Area Code Daytime Telephone Number			
			Name of Person		
RM UNIVERSAL PAINTING LLC					
Firm/Company					
		421 S. WOODLAND ST			
	Address				
		WINTER GARDEN, FL 3	4787		
		·	City/State and Zip Code		
		- -			
		E-mail address: (to be used for future annual report notif	ication)	
For furt	her information co	oncerning this matter, please ca	all:		
RAUL	RAMOS		352 874-6622		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclose	d is a check for th	e following amount:			
\$25	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	

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

AKTICLES OF AMENDMENT

TO ARTICLES OF ORGANIZATION OF

RM UNIVERSAL 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 10/12/2011 and assigned
Florida document number L11000116593	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	
Name of New Production of Assess	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Page Code
New Registered Agent's Signature, if changing Registered Agent:	ASE ASE
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, If this document is
If Cha	nging Registered Agent, Signature of New Registered Agent

or removed from our records:

~ .

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	MINERVA RAMOS	421 S WOODLAND ST			
		WINTER GARDEN FL 34787	Remove		
			☐ Change		
MGR	GENESIS J ROSA	421 S WOODLAND ST	_□ Add		
		WINTER GARDEN FL 34787	■ Remove		
			Change		
			Add		
			□ Remove		
			Change		
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Effective date, if other than (If an effective date is listed, the date Note: If the date inserted in the document's effective date on the	must be specific and is block does not me	cannot be prior to da eet the applicable	te of filing or more than statutory filing requi	(optional) 190 days after filing, rements, this date) Pursuant to	605.0207 listed as
the record specifies a dela) The 90th day after the		ate, but not an	effective time,	at 12:01 a.m.	on the ea	arlier of
Dated MAY 1	,	2015			SEGRE	15 版
		Tomb			TARY	7 - 9
	Signature of a	nember or authorized	representative of a me	ember		E I
	Raul	Rame Typed or printed nai	05		ORIS	

Page 3 of 3

Filing Fee: \$25.00