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(Requestor's Name)
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, ,
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EN SIGN OF CONTRACTOR

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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PAINTING GUYS LLC Name of Limited Liability Company
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:
Juan Ramon Mena (arvaja) Name of Person
Painting Gruys LLC Firm/Company
1447 STONE RD APT # 81 Address
Tallghassee Fl, 32303 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tuan Ramon Mena Carvaja at (850) 321-5752 2 38 8 38 74
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{Certified Copy} (additional copy is enclosed)}\$\$\$ 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

Painting	GIUYS L	1			
(Name of the Limited Liabili (A Jorid	ity Company as it a Limited Liability	now appears on our Company)	records.)		
The Articles of Organization for this Limited Liability Florida document number	Company were fi	led on Oct 2	, 2012	and assigned	
This amendment is submitted to amend the following:		·			
A. If amending name, enter the new name of the li	mited liability co	mpany here:			•
The new name must be distinguishable and end with the v "L.L.C."	vords "Limited Liab	ility Company," the c	lesignation "LLC	" or the abbrev	riation
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADI	DRESS) T	147 Stone allahassee	F1 323	#81 03	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	_ <u></u>	447 Stone Tallahassee	Pd A	A # 81	
B. If amending the registered agent and/or regregistered agent and/or the new registered office a	ddress here:		1	0 mame of man 1757E	e new
Name of New Registered Agent: New Registered Office Address:	Juan Kam 1447 S	tone Rd	Carvaja Apt #	8) [
-1	Tallahasse City	e ‡	, Florida3	2303 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.

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

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ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
actober 30, 2013.
(all)
Signature of a member or authorized representative of a member
Juan Ramon Mena Carvajal

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