13000004299

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phone #	<i>f</i>)
		_
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	9)
(Do	ocument Number)	
(= -	,	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
		;



06/04/13--01014--014 **25.00

FILED
2013 JUN -4 PN 2: 35
SECRETARY OF STATE
SECRETARY OF FLORIDA

Office Use Only

COVER LETTER

. :

TO: Registration Se Division of Cor		or of the second of the secon	\$
SUBJECT:	Tw Pn:nt Name of Limit	ted Liability Company	12 <u>C</u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	- Same 5	Name of Person	
		Name of Person	
	STW PA	Firm/Company	240
	1847 K:11	Address	
		Address	
	priddle 13.	City/State and Zip Code	
		O be used for future annual report notificat	
For further information co	oncerning this matter, please ca		
Name of	Person	at (254) 866 578 Area Code & Daytime To	elephone Number
Enclosed is a check for th	ne following amount:		
\$25.00 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:

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

FILED 1913 JUN -4 PM 2:35

Zip Code

JTW tainting and Repairs LLCALLAMASSECTES	1.
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
he Articles of Organization for this Limited Liability Company were filed on and assigned	
lorida document number 11 300000 4299.	
his 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 end with the words "Limited Liability Company," the designation "LLC" or the abbrevia L.L.C."	_ tion
nter new principal offices address, if applicable:	_
Principal office address MUST BE A STREET ADDRESS)	
Inter new mailing address, if applicable:	_
Mailing address MAY BE A POST OFFICE BOX)	_
8. If amending the registered agent and/or registered office address on our records, enter the name of the egistered agent and/or the new registered office address here:	- iew
Name of New Registered Agent:	-
New Registered Office Address:	
Enter Florida street address	
, Florida	

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.

City

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
16KM	FABITHA Williams	1867 Killaun Circle	Add
		Middle Burg FL. 32061	& Remove
		 	-
			Add
			Remove
			-
-			_ Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove

Ifar	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	• • • • • • • • • • • • • • • • • • • •
ted _	May 29 Th , 2013.
	Signature of a member or authorized representative of a member
	James williams
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

