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COVER LETTER

	istration Sec ision of Corp			
SURIECT:	CASABLA	NCA PAINTING AND ROOF	FRESTORATION LLC	
Name of Limited Liability Company				
		Amendment and fee(s) are sub	_	
Please return	all correspo	ndence concerning this matter	to the following:	
		OSCAR M CUELLAR		
			Name of Person	
		CASABLANCA PAINTIN	NG AND ROOF RESTORATION L	LC
	Firm/Company			
	429 E HARDING ST			
			Address	· · · · · · · · · · · · · · · · · · ·
		ORLANDO, FL. 32806		
		·	City/State and Zip Code	
		CASABLANCAPAINTING	_	
		E-mail address: (to be used for future annual report notif	ication)
For further it	nformation co	oncerning this matter, please c	all:	
OSCAR M (CUELLAR		407 617-2014 at ()	
	Name of	Person		Telephone Number
Enclosed is a	a check for th	e following amount:		
\$25.00 F	Tiling Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 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

CASABLANCA PAINTING AND ROOF RESTORATION 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 05/28/13 and assigned Florida document number _____L13000076901 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: CASABLANCA PAINTING LLC The new name must be distinguishable and contain the words "Limited Liability 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 office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City

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 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 Page 1 of 3

> > •

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			□ Remove
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			□ Add
			□ Remove
			Change
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		RETARY OF SAHASSES, PL	
		Y OF STA	TH
		~	_□ Change

	n, enter change(s) here: (Attach additional shee	is, if necessary.)
		
		
		
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Effective date, if other than the da If an effective date is listed, the date must be	specific and cannot be prior to date of filing or more than 9	0 days after filing.) Pursuant to 605.0207 (
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing require rtment of State's records.	ments, this date will not be listed as t
he record specifies a delayed ef The 90th day after the record	ffective date, but not an effective time, at l is filed.	12:01 a.m. on the earlier of:
Dated FEBRUARY 08	. 2017	
Sig	mature of a member or authorized representative of a mem	ber
OSCAR E CUELLAR		图 3
	Typed or printed name of signee	37 2
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	Page 3 of 3	STA FLOR
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