

L13000077074 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Elite Pressure Washing & Painting, 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:

Christopher Walters

Name of Person

ELITE PRESSURE WASHING & PAINTING, LLC

Firm/Company

8478 LEATHERLEAF LANE

Address

ORLANDO, FL 32827

City/State and Zip Code

CWALTERS7257@GMAIL.COM

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

For further information concerning this matter, please call:

CHRISTOPHER WALTERS at **(407) 230-6285**

Name of Person

Area Code & Daytime Telephone Number

2013 DEC 30 PM 4: 17
TALLAHASSEE, FL
REGISTRATION SECTION

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)
- \$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**

ELITE PRESSURE WASHING & 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 05/28/2013 and assigned Florida document number L13000077074.

This 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 abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

8478 LEATHERLEAF LANE
ORLANDO, FL 32827

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

8478 LEATHERLEAF LANE
ORALNDO, FL 32827

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

_____, Florida _____
City 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:

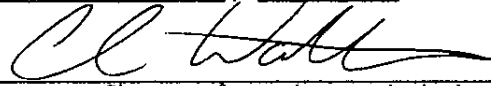
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Christopher Walters	8478 Leatherleaf lane	<input type="checkbox"/> Add
		Orlando, Fl 32827	<input type="checkbox"/> Remove
MGRM	Brannndon Lee	6715 Mission Club Blvd	<input type="checkbox"/> Add
		Apt 207	<input checked="" type="checkbox"/> Remove
		Orlando, FL 32821	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 12/30/2017, Dec.



Signature of a member or authorized representative of a member

Christopher Walters

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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FALLAH SSI ALORIN



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 19, 2013

CHRISTOPHER WALTERS
ELITE PRESSURE WASHING & PAINTING, LLC
8478 LEATHERLEAF LANE
ORLANDO, FL 32827

SUBJECT: ELITE PRESSURE WASHING & PAINTING, LLC
Ref. Number: L13000077074

We have received your document for ELITE PRESSURE WASHING & PAINTING, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 213A00028850

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TALLAHASSEE, FLORIDA