

L13000114985 ✓

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

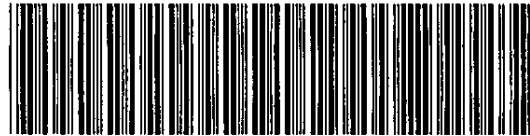
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2013 AUG 27 PM 4: 06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

AUG 28 2013

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **My Paint Party, 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:

Tana G. Plyler

Name of Person

My Paint Party, LLC

Firm/Company

537 Harrison Ave.

Address

Panama City, FL 32401

City/State and Zip Code

tana@mypaintparty.com

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

For further information concerning this matter, please call:

Tana G. Plyler

Name of Person

at **(850) 258-2112**

Area Code & Daytime Telephone Number

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

CLERK OF COURT
TALLAHASSEE, FL 32301

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My Paint Party, LLC

The Articles of Organization for this Limited Liability Company were filed on August 14, 2013 and assigned Florida document number **L13000114985**.

A. If amending name, enter the new name of the limited liability company here:

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

, 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

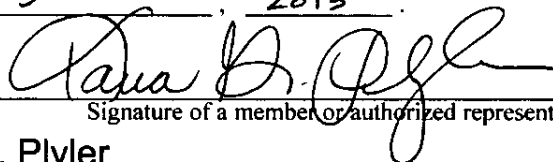
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Daniel B Plyler Jr	11812 Cabana Crt	☐ Add
		Panama City Beach, FL 32407	☒ Remove
			☐ Add
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			☐ Add
			☐ Remove

STATE OF FLORIDA
 TALLAHASSEE

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 8-22-13, 2013



Signature of a member or authorized representative of a member

Tana G. Plyler

Typed or printed name of signee

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Filing Fee: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA