

L/3000117578

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01/06/14--01003--021 **30.00

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: MULTICOLOR W/EXTERIOR & INTERIOR 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:

Deborah Santiago Bonilla
Name of Person

MULTICOLOR W/EXTERIOR & INTERIOR LLC
Firm/Company

7329 MAI TAI DR
Address

ORLANDO, FL 32822
City/State and Zip Code

Jorge.OSMARO89@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Santiago Bonilla at (407) 219-2960
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

Multicolor With EXTERIOR AND INTERIOR 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 8/20/2013 and assigned
Florida document number 213000117578.

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)

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:

DEBORAH SANTIAGO BONILLA

New Registered Office Address:

7329 MIA TIA DRIVE

Enter Florida street address

ORLANDO

City

Florida

32822

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 n

Firmar →

Deborah Santiago Bonilla

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	Nixon J Dubon	7329 MAI TAI DRIVE	<input type="checkbox"/> Add
		ORLANDO, FL 32822	<input checked="" type="checkbox"/> Remove
MGRM	MARCO T GALO	7329 MAI TAI DRIVE	<input type="checkbox"/> Add
		ORLANDO, FL 32822	<input checked="" type="checkbox"/> Remove
MGRM	Elpidio D Aquilera	7329 MAI TAI DRIVE	<input type="checkbox"/> Add
		ORLANDO, FL 32822	<input checked="" type="checkbox"/> Remove
MGRM	JESUS A LOPEZ PINEDA	7329 MAI TAI DRIVE	<input type="checkbox"/> Add
		ORLANDO, FL 32822	<input checked="" type="checkbox"/> Remove
MGRM	Jorge O Dubon	7329 MAI TAI DRIVE	<input type="checkbox"/> Add
		ORLANDO, FL 32822	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

* Dated _____, _____.

* Deborah Santiago Bonilla
Signature of a member or authorized representative of a member.

* Deborah Santiago Bonilla
Typed or printed name of signee

← Firmar

← Nombre

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Filing Fee: \$25.00

FILED
2014 JAN -6 PM 2:25
FEDERAL SEC. DIV.
WASHINGTON, D.C.