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SECRETARY OF STATE
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OCT 1 4 2014
T. HAMPTON

COVER LETTER

TO:	Registration Secti Division of Corpor		·	.
SUBJE	ст:	Gills Qualit Name of Limi	Ly Decorating Lited Liability Company	LC
The end	closed Articles of An	nendment and fee(s) are sub-	mitted for filing.	
Please	return all corresponde	ence concerning this matter	to the following:	
		Ke	vin Mc Gill	
			Puality Decorate Firm/Company	ing LLC
		18504 S	ebring Road. Address	
		For+ My	City/State and Zip Code	7
	-	Kevmad (E-mail address: (1	Ogmail. Com obbused for future annual report noti	fication)
For furt	ther information cond	erning this matter, please ca	all:	
	Kevin McGi Name of Po	erson	at (<u>339</u>) <u>207</u> Arca Code Daytim	- 4880 te Telephone Number
Enclose	ed is a check for the t	ollowing amount:		·
\$25	5.00 Filing Fee	S30.00 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

Mc 6/1/5 (Name of the Limits	Quality ed Liability Company	Decoration as it now appears on our	ng UC	
	(A Florida Limited Lia	as it now appears on our bility Company)		
The Articles of Organization for this Limited Li. Florida document numberL_13000141		ere filed on	107/2013	and assigned
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liabili	ty company here:		
The new name must be distinguishable and end with the	words "Limited Liabilit	ty Company," the designat	ion "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applica	able:			
(Principal office address MUST BE A STREE	T ADDRESS)		SECRETAI TALLAHAS	O SECTION SECT
Enter new mailing address, if applicable:			X. X	 (Υ)
(Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>		FLORID.	- D
B. If amending the registered agent and/or the new registered of	fice address here:			
Name of New Registered Agent:	Kevia	McGill		
New Registered Office Address:	18504	4 SEDINO Enter Florida stree	Road	
	Fort M	MC (gill SEDTING Enter Florida street YELS City	, Florida <u>38</u> Zi	947 p Code
New Registered Agent's Signature, if changing B				

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

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

MGR = Manager

AMBR =	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
AMBR	Kurt Daniel PiontKowski	9216 Pomelo Rd East Fort Myers, FL 3396	P2 Add
		Fort Myers, FL 3396	7_□ Remove
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