

**L130001549S3**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

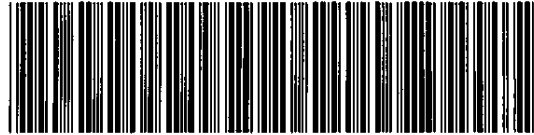
**L13-1549S3**

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Gulligan DEC 12 2013



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 21, 2013

PAUL LORUSSO  
6020 ANTIGUA COURT  
FLEMING ISLAND, FL 32003

SUBJECT: LORUSSO PAINTING AND HOME REPAIRS, LLC  
Ref. Number: L13000154953

We have received your document for LORUSSO PAINTING AND HOME REPAIRS, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$25.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 513A00026945

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LoRusso Painting and Home Repairs 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:

PAUL LoRusso  
Name of Person

LoRusso Painting and Home Repairs LLC.  
Firm/Company

6020 Antigua Court  
Address

FLEMING Island, FL. 32003  
City/State and Zip Code

LoRusso Painting1@qol.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PAUL LoRusso at (904) 424-5488  
Name of Person 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

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED  
2013 DEC 12 PM 12:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LoRusso Painting and Home Repairs 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 November 4-2013 and assigned Florida document number L13000154953.

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:

New Registered Office Address:

*Enter Florida street address*

City, Florida

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	ANTHONY M. LoRusso	324 Cappelia RD	<input checked="" type="checkbox"/> Add
		Orange Park, FL, 32073	<input type="checkbox"/> Remove
MGRM	Aaron M. Hayes	6020 Antigua Court.	<input checked="" type="checkbox"/> Add
		Fleming Island, FL.	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

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

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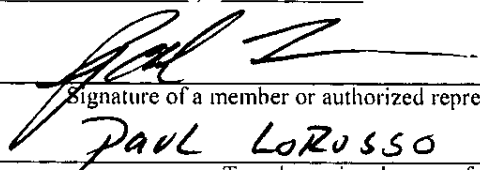
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Dated November 18<sup>th</sup>, 2013



Signature of a member or authorized representative of a member

PAUL LoRUSSO

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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