

L14000026300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

(APR 11 2014

J. BRUCE

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Tim White Painting L.L.C.  
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:

Tim White  
Name of Person

Tim White Painting LLC  
Firm/Company

11632 Oak Ave  
Address

lake Placid, FL 33852  
City/State and Zip Code

Timswhite69@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gwen White at (863) 441-2845  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Tim White 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 Feb 14, 2014 and assigned Florida document number L14000026300.

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:

Tim White

New Registered Office Address:

1632 Oak Ave

Enter Florida street address

Lake Placid

City

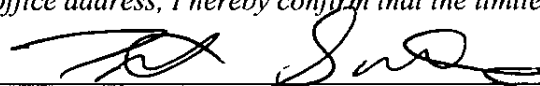
, Florida

33852

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 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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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President	Gwen White	1632 Oak Ave	<input type="checkbox"/> Add
		Lake Placid, FL 33852	<input checked="" type="checkbox"/> Remove

MGR	Tim White	1632 Oak Ave	<input type="checkbox"/> Add
		Lake Placid, FL 33852	<input checked="" type="checkbox"/> Remove

President	Tim White	1632 Oak Ave	<input checked="" type="checkbox"/> Add
		Lake Placid, FL 33852	<input type="checkbox"/> Remove

mgr	Gwen White	1632 Oak Ave	<input type="checkbox"/> Add
		Lake Placid, FL 33852	<input checked="" type="checkbox"/> Remove

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TALLAHASSEE FLORIDA

			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I would like to remove myself as (Gwen White)  
president and Put Tim White as President  
I would like to put Gwen White as a  
manager and remove Tim White as  
manager

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated April 6<sup>th</sup>, 2014.

Gwen White

Signature of a member or authorized representative of a member

Gwen White

Typed or printed name of signee

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