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(Ad	ldress)	<u>, </u>
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JUL 07 2015

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COVER LETTER

	gistration Sec vision of Corp			
· jes	JC Brighton	Painting LLC		
SUBJECT:		Name of Limit	ted Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are subm	mitted for filing.	
Please returr	all correspon	dence concerning this matter t	to the following:	
		Jessie Padilla		
			Name of Person	
		Debbie's Accounting Service	ce Inc	
			Firm/Company	
		3575 Southside Blvd		
			Address	
		Jacksonville, Florida 32216	5	
			City/State and Zip Code	
		Jessie@debbiesaccountingse		
		E-mail address: (te	o be used for future annual report notif	fication)
For further in	nformation co	ncerning this matter, please ca	ill:	
Jessie Padill	a .		904 733-4547 at ()	
	Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is a	a check for the	following amount:		
≘ \$25.00 F	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 ARTICLES OF ORGANIZATION OF

JC Brighton Painting LLC			
(Name of the Limit	(A Florida Limited	pany as it now appears on our records I Liability Company)	ر)
The Articles of Organization for this Limited L	iability Compan	y were filed on June 22, 2015	and assigned
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited lia	bility company here:	
N/A			
The new name must be distinguishable and contain the v	vords "Limited Lial	bility Company," the designation "LLC"	or the abbreviation "L.L.C"
Enter new principal offices address, if applic	able:	N/A	
Principal office address MUST BE A STREE	T ADDRESS)		·
		<u></u>	
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and registered agent and/or the new registered of			, enter the name of th
Name of New Registered Agent:	N/A		
Name of New Registered Agent:	N/A		
Name of New Registered Agent: New Registered Office Address:	N/A	Enter Florida street address	
-	N/A	Enter Florida street address , Flo	

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 Agen

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member '

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Kent J. Samaniego	465 Lombard St	■ Add
		Orange Park, Florida 32073	□ Remove
			☐ Change
			☐ Remove
			☐ Change
	**************************************		□ Add
			□ Remove
			□ Change
			□ Add
			☐ Remove
			☐ Change
			O Add
			TARY OF CL
			PH 1003 Remove
			Change

Y/A		
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