

L15000109792

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

((H19000136327 3)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : DBS DIEZ BUSINESS SERVICES INC
Account Number : 120170000096
Phone : (813) 871-1816
Fax Number : (813) 884-5920

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GARCIA'S AFFORDABLE PAINTING LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

2019 APR 26 PM 12:49

FILED

RECEIVED

2019 APR 26 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

2019-04-26 16:49

DBS 813 884 5920 >> 850-617-6381

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- change of name.



April 26, 2019

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GARCIA'S AFFORDABLE PAINTING LLC
2204 BLIND POND AVE
LUTZ, FL 33549

SUBJECT:
REF: H19000136327

We have received your document for and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

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) 245-6052.

Tacarri K Glass
Regulatory Specialist II

FAX Aud. #: H19000136327
Letter Number: 019A00008432

2019-04-26 16:50

DBS 813 884 5920 >> 850-617-6381
ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GARCIA'S AFFORDABLE PAINTING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

FILED
2019 APR 26 PM 12:19
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The Articles of Organization for this Limited Liability Company were filed on 06/24/2013 and assigned
Florida document number E15000109792.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

WELDING & PAINTING SOLUTIONS LLC

The new name must be distinguishable and contain 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

Florida

City

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

2019-04-26 16:50

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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>	<u>Type of Action</u>
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change
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_____	_____	_____	☐ Add
_____	_____	_____	☐ Remove
_____	_____	_____	☐ Change

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

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

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 505.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated APRIL 08 2019

Signature of _____

Signature of a member or authorized representative of a member

ROQUE J GARCIA MUNGUIA

Typed or printed name of signer

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Filing Fee: \$25.00

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