

116000022559

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

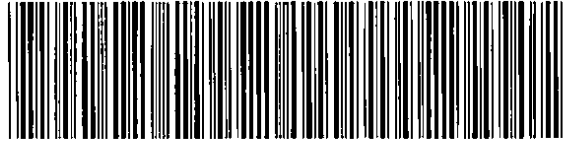
(Business Entity Name)

(Document Number)

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SOUTH CAROLINA
FALL KIRKLAND & LORRIDA

JUL 31 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: B & W PAINTING LLC
Name of Limited Liability Company

The enclosed articles of amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

GREG GOLFE

Name of Person

B AND W PAINTING LLC

Firm/Company

1826 19TH AVE APT 20

Address

VERO BEACH FL 32960

City/State and Zip Code

BANDWPAINTING16@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GREG GOLFE

772

453-3976

Name of Person

at ()

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
Chilton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

B & W 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 02-02-2016 and assigned
Florida document number L16000022559

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 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)

1826 19TH AVE APT. 20

VERO BEACH FL. 32960

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1826 19TH AVE APT 20

VERO BEACH FL. 32960

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:

ARTHUR J HILL E.A.

New Registered Office Address:

2001 9TH AVE STE 103

Enter Florida street address

VERO BEACH

, Florida 32960

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

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

Title	Name	Address	Type of Action
AMBR	FRANK NESBITT	1755 46TH AVE	<input type="checkbox"/> Add
		VERO BEACH FL. 32968	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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TALLAHASSEE FLORIDA

[illegible]

06-01-2017

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.

Dated _____, _____

Signature of a member of the

Signature of a member or authorized representative of a member

Gregory Golfe
Typed or printed name of signatory

Typed or printed name of signee

FILE
2017 JUL 26 PM 3:05
SECURITY SERVICE
TALLAHASSEE FLORIDA