

L160000 32056

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

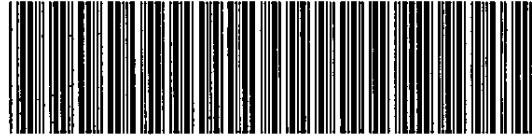
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL 323

JUN 07 2016
J. BRUCE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
2016 JUN -6 PM 2:34
TALLAHASSEE, FLORIDA

May 16, 2016

JEAN DANIEL M COLAS
13337 SW 64 LN
MIAMI, FL 33183

SUBJECT: ADVANCE PAINT CONTRACTORS LLC
Ref. Number: L16000032056

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

Your document is being returned as requested.

To receive a refund, please submit a written request to the attention of the undersigned. Be sure to include the name of the person or entity the check should be made payable to and the address to which it should be mailed.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 916A00010313

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ADVANCE PAINT CONTRACTORS 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:

JEAN DANIEL M COLAS

Name of Person

ADVANCE PAINT CONTRACTORS LLC

Firm/Company

13337 SW 64 LN

Address

MIAMI, FL 33183

City/State and Zip Code

jeandaniel.colas@gmail.com

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

For further information concerning this matter, please call:

JEAN DANIEL M COLAS

503

421- 0579

at ()

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

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JUN 6 P 4:32
STATE
SECRET
FLORIDA

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

ADVANCE PAINT CONTRACTORS 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 02/16/2016 and assigned
Florida document number L16000032056.

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)

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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ROMY DAN ECKARDT	12305 SW 132 Court	☐ Add
		Miami, Fl 33186	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
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			☐ Change

2016 JUN -6 P 4:32
TALLAHASSEE, FLORIDA

[illegible]

FILED
2018 JUN -6 P 4:31
TALLAHASSEE, FLORIDA