116000036108

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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S Warren APR 2 5 2017



April 14, 2017

BAUDILA PINEDA 59 CHESTNUT AVE SE, APT. 55 FORT WALTON BEACH, FL 32547

SUBJECT: PINEDA PAINTING LLC

Ref. Number: L16000036108

We have received your document for PINEDA PAINTING 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):

The form you submitted is for a FOREIGN LLC, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

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.

Stacey M Warren Regulatory Specialist II

Letter Number: 317A00007365

COVER LETTER

Division of Corporations			
SUBJECT: Pineda Painting LLC	;		
Name of Foreign		ility Comp	any
Dear Sir or Madam:			
The enclosed application, certificate and fee(s) a	re submitted f	for filing.	
Please return all correspondence concerning this	matter to the	following:	
Baudilia Pineda			
Name of Person		_	
Pineda Painting LLC			
Firm/Company		-	
59 Chestnut ave SE apt 55			
Address		_	
Fort Walton Beach FI, 32547	7		
City/State and Zip Code		-	
Bppainting15@gmail.com			
E-mail address: (to be used for future annual r	eport notifica	tion)	
For further information concerning this matter, p			
Mauricio Bonilla	_{at (} 850	_{.)} 687-	1204
Name of Person	Area Code	& Daytim	e Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, Florida 32314
Enclosed is a check for the following amount: \$\begin{align*} \text{ \$\text{S}} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \		ng Fee & d Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

TO: Registration Section

ARTICLES OF AMENDMENT TO : ARTICLES OF ORGANIZATION OF

Name of the Limited	Cinting	any as it now appears on our records.) Mability Company)		
(A	Florida Limited I	Mability Company)		
The Articles of Organization for this Limited Liabi	lity Company	y were filed on $02/22/16$ and assigned		
Florida document number <u>L1600036</u>				
This amendment is submitted to amend the following	no.			
A. If amending name, enter the new name of th	<u>e limited liab</u>	bility company here:		
The party name must be distinguishable and contain the word	c "Limited Liahi	eility Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		= 19 Chesnut aue Se		
(Principal office address MUST BE A STREET ADDRESS)		Fort walten Beach or 32548		
		tort walten Beach 12 3254		
Putan many mailing address if amiliables		19 Cheshut ove SE		
Enter new mailing address, if applicable:		APT SS		
(Mailing address MAY BE A POST OFFICE BO	<u>A)</u>	Fort watton Beach FL-32548		
•		1017 CONTON DEACE TE SEJ 70		
B. If amending the registered agent and/or registered agent and/or the new registered offic		office address on our records, <u>enter the name of the ne</u> re:	<u>w</u>	
		•		
Name of New Registered Agent:				
New Registered Office Address:	19 che	Stout Ave SE		
models of		Enter Florida street address		
	toct h	Latton Beach, Florida 32548		
Now Desistened Asset's Signature if shanging December	istavad Agantı	City Zip Code .		
New Registered Agent's Signature, if changing Reg			_	
provisions of all statutes relative to the proper	and complete red agent as j istered office	ree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or This document is e address, I hereby confirm that the limited limiting	?	
		SET OF THE		
	ICCh.	anging Registered Agent, Signature of New Registered Agent		
	ti Cha	anging registered Agent, Signature of them Rombered 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> Address Type of Action Bandilia Pineda Hernandez Ambe **⊅**Z Add 72548 Remove ☐ Change □ Add □ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ?: *** ☐ Change

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fective date, if other than the da	ite of filing:		(optional)	
n effective date is listed, the date must be te: If the date inserted in this block	e specific and cannot be price to the specific and cannot be price to the specific applications.	or to date of filing or more tha icable statutory filing requ	n 90 days after filing.) Pursuant to 60: irements, this date will not be list	5.020 ed a
cument's effective date on the Depa				
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Filing Fee: \$25.00