# 4/6000 152397

(Requestor's Name)	_
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
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### **COVER LETTER**

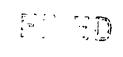
TO: Registration S- Division of Co			
Think Pair	nt, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Mihail Iakovids		
		Name of Person	
	Think Paint, LLC		
	<del> </del>	Firm/Company	<del></del>
	6039 Cypress Gardens Blv	⁄d	
		Address	, <u>, , , , , , , , , , , , , , , , , , </u>
	Winter Haven, Florida 338	884-4115	
	<del> –</del>	City/State and Zip Code	
	thinkpaintllc@outlook.com		
	E-mail address: (	to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
Mihail lakovids		863 837-7265	
Name (	of Person	at ()	Telephone Number
Enclosed is a check for t	he 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2019 JUL 11 AM 7:48

Think Paint, 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 08/15/2016 \_\_\_\_\_ and assigned Florida document number \_\_\_\_L16000152397 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." Think Paint, LLC Enter new principal offices address, if applicable: 6039 Cypress Gardens Blvd (Principal office address MUST BE A STREET ADDRESS) Winter Haven, Florida 33884-4115 Think Paint, LLC Enter new mailing address, if applicable: 6039 Cypress Gardens Blvd (Mailing address MAY BE A POST OFFICE BOX) Winter Haven, Florida 33884-4115 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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

\_, Florida \_\_\_\_

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	
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Effecti	ve date, if otl	ner than the date of f	filing:		(antio	anal)
(If an effe	ective date is liste If the date inse	ed, the date must be specifi	ic and cannot be prion not meet the appl	or to date of filing or n icable statutory filir	tore than 90 days after	tiling.) Pursuant to 605.020 date will not be listed a
the rec ) The	ord specifie 90th day af	s a delayed effectiv ter the record is fil	ve date, but n led.	ot an effective	time, at 12:01 a	.m. on the earlier o
Dated	7/8/2	2019				
		205 11 1	7		-7	
		Manuel	Car Can	horized representative	}-	<del>-</del>

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00