

# LI 6000166219

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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

From: Account Name : WF TAXES AND MORE INC.  
Account Number : I20200000043  
Phone : (772)879-0010  
Fax Number : (772)281-5520

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DEPT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

Email Address: Wftaxes.office@gmail.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TC BRIGHT COLORS, LLC

Certificate of Status	1
Certified Copy	0
Page Count	05
Estimated Charge	\$30.00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TC BRIGHT COLORS, 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:

JOSE ALVAREZ

Name of Person

TC BRIGHT COLORS, LLC

Firm/Company

1001 GATEWOOD AVENUE

Address

FORT PIERCE, FL 34982

City/State and Zip Code

WFTAXES.OFFICE@GMAIL.COM

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

For further information concerning this matter, please call:

JOSE ALVAREZ

772 828-6209  
at ( )  
Area Code Daytime Telephone Number

Name of Person

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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

TC BRIGHT COLORS, 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 09/06/2016 and assigned  
Florida document number L16000166219

This amendment is submitted to amend the following:

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

ALVAREZ PREMIER PAINTING LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"

Enter new principal offices address, if applicable:

1001 GATEWOOD AVENUE

(Principal office address MUST BE A STREET ADDRESS)

FORT PIERCE, FL 34982

Enter new mailing address, if applicable:

1001 GATEWOOD AVENUE

(Mailing address MAY BE A POST OFFICE BOX)

FORT PIERCE, FL 34982

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

**AMBR = Authorized Member**

\_\_\_\_\_ ☐ Change

[illegible]

**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 MARCH 20, 2024

JOSE ALVAREZ

Signature of a member or authorized representative of a member

JOSE ALVAREZ

Typed or printed name of signee

**Filing Fee: \$25.00**