117000006571

	(Requestor's Name)
	(Address)
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A. BUTLER APR 1 2 2022

COVER LETTER

TO:	Registration Se Division of Cor			
		ONY	T Painting LLC	
SUBJI	ECT:		· · · · · · · · · · · · · · · · · · ·	-
		Name of Lin	lited Liability Company	
The en	iclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
			John Matallana	
			Name of Person	
			ONYT Painting LLC	
			Firm/Company	
			48 Brook Dr	
		• • • • • • • • • • • • • • • • • • • •	Address	
			Santa Rosa Beach	
		 	City/State and Zip Code	
			onyt.painting@gmail.com	
			to be used for future annual report	notification)
For fur		oncerning this matter, please c		
	John M	latallana	850	902-6333
	Name o	f Person	at () Area Code Da	ytime Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2	5.00 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 Addres Registration S		Street Address Registration	
	Division of C			Corporations
	P.O. Box 632	7	The Centre of	of Tallahassee
	Tallahassee, I	FL 32314	2415 N. Mo	nroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

ONYT Painting LLC		2022 MAR 28 PH 1: 09
(<u>Name of the Limited Lia</u> (A Flo	bility Company as it now appears	on our records.)
The Articles of Organization for this Limited Liability	y Company were filed on	2022 MAR 28 PH 1: 09 on our records.) SECRETARY OF STATE O9 January 20175 SEE, Find assigned
Florida document numberL17000006571	<u> </u>	· ·
This amendment is submitted to amend the following	:	
A. If amending name, enter the new name of the l	imited liability company her	<u>e</u> :
ONYT Painting & Cleaning LLC		
The new name must be distinguishable and contain the words "I	limited Liability Company," the de	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registe agent and/or the new registered office address her		cords, <u>enter the name of the new registerec</u>
Name of New Registered Agent:		 _
New Registered Office Address:		
	Enter Flori	da 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 amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
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			☐ Change
			
		***************************************	□Remove
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		-			
					
(If an effective c Note: If the	te, if other than the dat date is listed, the date must be s date inserted in this block of effective date on the Depart	specific and cannot be prior does not meet the applic	r to date of filing or more than 9 cable statutory filing require	(optional) 0 days after filing.) Pursuant to ments, this date will not be	605.0207 (3 listed as th
ne record spec ord is filed.	ifies a delayed effective dat	e, but not an effective t	ime, at 12:01 a.m. on the ea	rlier of: (b) The 90th day a	ifter the
Б	18 March	2022			
Dated			m+1/-		
	Sign	/	orized representative of a mem	her	
		John Ma	tallana		