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(Re	equestor's Name)	
(Ad	Idress)	
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(Cit	ty/State/Zip/Phon	e #)
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(Dc	ocument Number	
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COVER LETTER

TO:	Registration Section Division of Corporations		 - 		
SUBJE	JECT: Continental P	GIN TIN	G + F	Pressure	LLC
The end	enclosed Articles of Amendment and fee(s) are submitted	d for filing			
Please	e return all correspondence concerning this matter to the	e following:			
	Adrianze	Name of Person	lando	M.	
	Continental	Painti Firm/Company	ng 4 F	rpssure	LLC
	7631 Sho	alimar Address	- SY.		
	MIRAMAC City STAXFOR E-mail address: (to be u	State and Zip Co	330. de 100. al report motifical	33 (11/.cem	
for furt	orther information concerning this matter, please call:	!			
Sai	Name of Person	at (<u>SØ</u>) Area Code	35/- Daytime Te	8540 elephone Number	-
Enclosed	sed is a check for the following amount:				
\$25.	25.00 Filing Fee & ロ \$30.00 Filing Fee & ロ : Certificate of Status	\$55.00 Filing Fe Certified Copy _l (additional copy is		□ \$60.00 Filing Fe Certificate of St Certified Copy (additional copy is)	atus &
		1			
	MAILING ADDRESS: Registration Section		ET/COURIER atton Section	ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT

ARTICLES OF ORGANIZATION OF

Continental Paint	y as it now appears on our records.) ability Company)
(Name of the Limited Liability Company (A Florida Limited Liab	y as it now appears on our records.)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L 170000769</u> 76	vere filed on 4/5/2017
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	ity 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)	70 B
_	
Enter new mailing address, if applicable:	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)	
_	
 If amending the registered agent and/or registered office egistered agent and/or the new registered office address here: 	e address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Cuy Zip Code
ew Registered Agent's Signature, if changing Registered Agent:	Zip Code
hereby accept the appointment as registered agent and agree to	to act in this capacity. I further goree to comply with the

t nevery 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 or removed f	Authorized Person(s) authorized to ma rom our records:	nage, <u>enter the</u>	title, name, a	nd address of c	ach person being added
MGR = Ma AMBR = Au	nager thorized Member		I		
<u>Title</u>	Name	Address	{ 		Type of Action
<u>AMB</u> K	Rolando M. Adrianzen	7631	Shali	mar St	Add
	Harianzen	Miran	nar, FL	mar St 33033	Remove
			<u>. </u>		Change
					
			<u> </u>		Remove
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ocument's effective date o	date must be specific and cannot be prior to a this block does not meet the applicaben the Department of State's records.	date of filing or more than 90 days af le statutory filing requirements, t	his date will not be listed as the
The 90th day after th	ne record is filed.	ar coecuve nine, ar 12:0)	a.m. on the earlier of
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ted 1/1/1/1			*****
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	Signature of a member or authorize	red representative of a member	JUL 21
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			Sign in the state of the state
	Page 3	of 3	5. F

Filing Fee: \$25.00