

L17000203624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

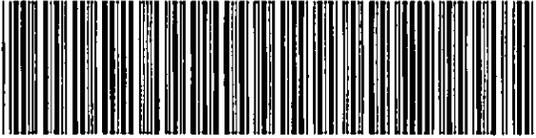
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2019 MAR 26 PM 2:53

T.G.  
3/28/19

**COVER LETTER**

*Letter Number*  
*519A00004015*  
*02/26/2019*

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GOMEZ & SAENZ HOME INVESTMENTS 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:

MONICA P. SAENZ

Name of Person

ULTRA PAINTING, LLC

Firm/Company

1442 WESTBURY DR

Address

CLERMONT, FL 34711

City/State and Zip Code

MONICAHAMON@HOTMAIL.COM

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

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CALLAHAN/STEFANOPOULOS

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FILED

For further information concerning this matter, please call:

MONICA SAENZ

352 638-2127

at ( )

Name of Person

Area Code

Daytime Telephone Number

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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

GOMEZ & SAENZ HOM INVESTMENTS 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 10/02/2017 and assigned Florida document number L17000203624.

This amendment is submitted to amend the following:

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

ULTRA PAINTING, LLC

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)

1442 WESTBURY DR

CLERMONT, FL 34711

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

1442 WESTBURY DR

CLERMONT, FL 34711

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TALLAHASSEE, FLORIDA

**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: MONICA P. SAENZ

New Registered Office Address: 1442 WESTBURY DR

*Enter Florida street address*

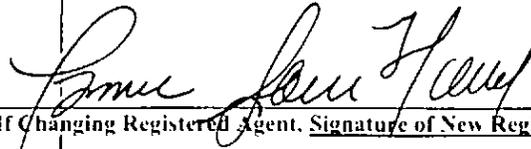
CLERMONT, Florida 34711

*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

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>	<u>Address</u>	<u>Type of Action</u>
MGRM	LUIS Y. GOMEZ	104450 SW STEPHANIE WAY	<input type="checkbox"/> Add
		APT 202	<input checked="" type="checkbox"/> Remove
		PORT ST LUCIE, FL34987	<input type="checkbox"/> Change
MGRM	LUIS Y GOMEZ	1442 WESTBURY DR	<input checked="" type="checkbox"/> Add
		CLERMONT, FL 34711	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	MONICA P. SAENZ	104450 SW STEPHANIE WAY	<input type="checkbox"/> Add
		APT 202	<input checked="" type="checkbox"/> Remove
		PORT ST LUCIE, FL 34987	<input type="checkbox"/> Change
MGRM	MONICA P. SAENZ	1442 WESTBURY DR	<input checked="" type="checkbox"/> Add
		CLERMONT, FL 34711	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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