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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN INVICTA PAINTING, LLC

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COVER LETTER

TO:	Registration Se Division of Cor			Second Request (Original submission 05/17/2018 FL
	INVICTA	PAINTING, LLC			
SUBJECT:		ited Liability Company			
		Amendment and fee(s) are sub			
		Cheyenne Moseley			
			Name of Person		
		Legaizoom.com, Inc.			
			Firm/Company		<u></u>
101 N. Brand Blvd., 11th Floor					
Address					
	Gicardale, CA 91203				
			City/State and Zip Code		
		Dolphin5434@msn.com			
For fur	ther information o	concerning this matter, please of	to be used for future annua all:	report nourceasury	
Cheye	nne Moseley			73-0888 ext. 9724	
	Name o	f Person	at () Area Code	Daytime Telephone !	Number
Enclose	ed is a check for t	he following amount:			
□ \$ 2:	5,00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is en	Co closed) Ce	0.00 Filing Fee, extificate of Status & extified Copy ditional copy is enclosed)
		ING ADDRESS:		T/COURIER ADDRI	ess:

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 TO ARTICLES OF ORGANIZATION OF

INVICTA PAINTING, LLC		. <u> </u>		
(Name of the Limited Lability Control (A Florida Limited Li	y as it now supears on our recu ability Company)	orda.)		
The Articles of Organization for this Limited Liability Company villarida document number L17000232121	were filed on 11/9/2017		and assigned	:
This amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the limited liabi</u>	lity company here:			
Perfect Finish Painting LLC		<u></u>	<u></u>	
The new name must be distinguishable and end with the words "Limited Liabi	lity Company," the designation "	LLC" or the abbro	vision "L.L.C.	и
Enter new principal offices address, if applicable:) b %	ا د ج	2
(Principal office address MUST BE A STREET ADDRESS)		<u>5</u> ≥	24 1.	
TANCTURE OF THE MINES IN COLUMN DE VEDERAL LAND WAS TO			C	
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m		<u>.</u>	ရွာ …	
Enter new mailing address, if applicable:			-6 5	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:	fice address on our reco	rds, <u>cater the</u>	name of th	<u> </u>
New Registered Office Address:	Enter Florida street ada	trees		
		Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as po being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, rovided for in Chapter 60	and I am fam. 5, F.S. Or, if ti	illar with an his documen	d
If Chan				

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member				
Title	Name	Address	Type of Action	
	<u>-</u>		□ Add	
			☐ Remove	
			□ Add	
			☐ Remove	
			Add	
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			D A4d	
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			- 7 Add 7	
			G Go Remove	
				

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Page 6 of 6	2018-06-18 07:11.16 PDT	LegalZoom.com, Inc	. From Sarah Acevedo
D. If amending any other in	formation, enter change(s) here: (Attach additions	al sheets, if necessary.)	
	an the date of filing: ic, cannot be prior to date of receipt or filed date and cannot be a y the Florida Department of State)	(optional)	
Dated	1ay 10. 2018.		
	Signature of a member or authorized representative of	а тепрет	
	Mark McMullen		
	Typed or printed name of signee		

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