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Office Use Only



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JECRETARY OF STATE

2022 DEC -7 PH 3: 1

COVER LETTER

TO:

Registration Section

Division of Co	rporations	,	•	•
	Interiors LLC		·* _*	•
SUBJECT:	Name of Lin	nited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Robert A Ellis			
		Name of Person		_
	Finetouch Interiors LLC			
	· · · · · · · · · · · · · · · · · · ·	Firm/Company		2
	1915 Dove Field Place			2022 DEC -7 PH
		Address		
	Brandon / Florida 33516			7 PK
		City/State and Zip Code		ب
	finetouchine H@yahoo.con E-mail address: 0	to be used for future annual report no	iffication)	- · · · · · · · · · · · · · · · · · · ·
For further information	concerning this matter, please e	·	,	
Robert A Ellis		954 6571699 at ()		
Name	of Person		me Telephone Numbe	r
Enclosed is a check for t	the following amount:			
□ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &
Mailing Addre Registration		Street Address: Registration Se	ection	
Division of 0		Division of Co		
P.O. Box 63:	27	The Centre of	Tallahassee	
Tallahassee,	FL 32314	2415 N. Monre	oe Street, Suite 8	310

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Finetouch Interiors LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Torida document number £17000262025	were filed on December 26, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L1.C" or	
inter new principal offices address, if applicable:		2022 n
Principal office address MUST BE A STREET ADDRESS)	<u> </u>	
		PA PA
nter new mailing address, if applicable:	-	<u> </u>
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>enter the</u>	name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	la
	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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Segal, Paul W		DAdd
		1959 Hammondville road Pompano Beach fl. 33069	= Remove
			□Change
AMBR	Maria L Ellis	1915 Dove Field Place Brandon Fl. 33510	≘ ∧dd
			□Remove
		TALL	Change 772 DEAdd
		77 (S)	Remove
			□Remove
			□Change
			□Ad∂
			DRemove
			□Change
			□Add
			□Remove

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fective date, if other than the date must be the date is listed, the date must be the date inserted in this block becament's effective date on the Department.	be specific and cannot be prior to ask does not meet the applicable	date of filing or more than le statutory filing requir	(optional) 90 days after filing.) Pursu ements, this date will no	ant to 605.02 of be listed :
ecord specifies a delayed effective is filed.	date, but not an effective time	c. at 12:01 a.m. on the ea	urlier of: (b) The 90th	day after th
December 4th	2022			
	Roth Ce			
	ignature of a member or authoriz			

Filing Fee: \$25.00