## UBCOCK 38275

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

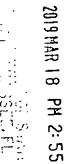
Office Use Only

6206-2575.



700325271307

02/26/19--01033--023 \*\*60.00



C. GOLDEN MAR 1 9 2018

## **COVER LETTER**

TO:	Registration Se Division of Cor			
er bu	Name Chan	ge		
2009)	ECT:	Name of Lim	ited Liability Company	
The en	aclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Roger Gutierrez		
		Empire Painting and Const	Name of Person raction, LLC	
	Firm/Company 4261 NW 178 Street			
			Address	
		Miami Gardens, FL 33055	City/State and Zip Code	
		empirepaintingandeonstruct E-mail address: (	to be used for future annual report notifie	ation)
For Iu	rther information c	oncerning this matter, please ca	all:	
Roger Gutierrez 305 6479710				
	Name o	f Person	Area Code Daytime	Telephone Number
Enclos	sed 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 ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 STREET/COURIER ADDRESS:

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



March 11, 2019

ROGER GUTIERREZ 4261 NW 178 STREET MIAMI GARDENS, FL 33055

SUBJECT: EMPIRE PAINTING AND CONSTRUCTION, LLC

Ref. Number: L18000038275

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by a member or an authorized representative of a member.

The name of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II

Letter Number: 719A00004838

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

-	07	2 1
	ORGANIZATION	A COLOR
	OF	
Empire Painting and  (Name of the Limited Liability Comp  (A Florida Limited)	1 Construction  any as it now appears on our reco	ords.) UC
The Articles of Organization for this Limited Liability Company Florida document number 1190003275.	y were filed on $\frac{\partial}{\partial x}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
Empire Painting and Water The new name must be distinguishable and contain the words "Limited Liab	or of ing U	J.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	4261 NW 1	78 Street
(Principal office address MUST BE A STREET ADDRESS)	MIIami Car	rdens, FL 33USS
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		
Training address Mirit Dis 711 Oct 1 TOE DONE		
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he		rds, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	lress
		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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Address	Type of Action
		<del> </del>	Add
			□ Remove
_			☐ Change
<del></del>			Add
		***	□ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Add
			□ Remove
		<del></del>	Change
<u></u> .			Add
			Remove
		<del></del>	Change
			□ Remove
			Change

	·	<u>-</u>				
				-		
		<u> </u>				
			<u> </u>		·	
	-					
					186 M	
					· <del>* · · · · · · · · · · · · · · · · · ·</del>	
				<del></del>		
					<u></u>	
				-		
			***			
						-
ote: If the o	e, if other than the date is listed, the date must blate inserted in this block fective date on the Department	k does not meet tl	ne applicable stati	filing or more than satory filing require	(optional) 00 days after filing.) ements, this date v	Pursuant to 605,020 will not be listed a
record s The 90th	pecifies a delayed e day after the recor	effective date, d is filed.	but not an ef	fective time, a	t 12:01 a.m. d	on the earlier o
			ر د			
			er arisantiorized rep	resentative of a men	ıber	

Page 3 of 3

Filing Fee: \$25.00