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COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
EDUAR DO RIBEIRO
LISTO TILE AND PAINTING LLC Firm/Company
8680 WELLINGTON BLUE LANE
34786 WINDERMERE City/State and Zip Code
Listotile Painting a grant com E-mail address: (to be used to future annual report notification)
For further information concerning this matter, please call:
EDUAR DO RIBEIRO at (921) 544-6942. Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)
\$25.00 Filing Fee \$\Bigcup \text{\$\$\$30.00 Filing Fee & \$\Bigcup \text{\$\$\$\$\$\$Certificate of Status (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \text{\$\$\$\$\$\$\$\$\$\$\$Certified Copy (additional copy is enclosed)}\$\Bigcup \$

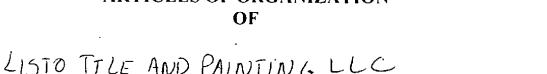
MAILING ADDRESS:

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 ARTICLES OF ORGANIZATION



(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 Florida document number <u>418000090024</u> .	were filed on <u>04/10/2018</u> 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:
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8680 WELLINGTON BLUE LAI
(Principal office address MUST BE A STREET ADDRESS)	WINDERMERF 34786
Enter new mailing address, if applicable:	SAME
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:	fice address on our records, enter the name of the n
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

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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 ad or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ANDRE CARVAZHO	1012 MARLIN LAKES CIRC.	Add
			Remove
			Change
			□ Remove
			Change
			□ Remove
			Change
	<u> </u>		Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated <u>08/04/0019</u>
Signature of a member or authorized representative of a member
EDUARDO RIBEIRO Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00