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N. CAUSSEAUX MAY 2 9 2018

COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJE		e Painting Services LLC				
		Name of Limi	ted Liability Company			
The en	closed Articles of A	Amendment and fee(s) are subr	nitted for filing.			
Please	return all correspon	ndence concerning this matter t	to the following:			
		Scott P DeCruccio				
		· · · · · · · · · · · · · · · · · · ·	Name of Person	<u> </u>		
		Classic Coastal Finishes	LLC			
		· · ·	Firm/Company			
1996 Hovington Circle West						
			Address	<u> </u>		
		Jacksonville, FL 32246				
			City/State and Zip Code			
		sdec130@gmail.com				
		E-mail address: (t	to be used for future annual report notifica	tion)		
For fur	ther information co	oncerning this matter, please ca	dh:			
Scott	P DeCruccio		904 586-2550 at () Area Code Daytime To			
	Name of	Person	Area Code Daytime To	elephone Number		
Enclos	ed is a check for th	c following amount:		1		
☐ \$ 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, 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

Gator Done Painting Services LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number <u>L18000118891</u>	oility Company were filed on May 11, 2018	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
Classic Coastal Finishes LLC		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicab		2318 1000
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	H 0.5
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>en</u> ce address here:	iter the name of the nev
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	<u> </u>
	, Florida	a
	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> Name | **Address Type of Action** ___ 🗆 Add □ Remove __ Change □ Add ☐ Remove ☐ Change _□ Add ☐ Remove _□ ∨ੴ ☐ Change _□ Add ☐ Remove _ Change _ Add □ Remove

_ Change

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			•	.
Effective date, if other than the dat	e of filing:	to data of filing or m	(optiona	l)
Note: If the date inserted in this block	does not meet the applica	able statutory filin		
document's effective date on the Depart	tment of State's records.			
ne record specifies a delayed eff	fective date, but no	t an effective t	ime. at 12:01 a.m	. on the earlier of
The 90th day after the record				
Dated May 22,	2018			
Dated		<u></u>		
Scott	4. d b()	rellis		
Scott	nature of a member or author	AUCG6 prized representative	of a member	

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Filing Fee: \$25.00