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COVER LETTER

TO:

Registration Section

Division of Cor	rporations		
	TING AND SERVICE, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JOSE ROSALES		
	-	Name of Person	
		Firm/Company	
	10655 SW 113TH PL AP	тв	
		Address	
	MIAMI, FL 33176		
	AGUSROSALES@GMAI	City/State and Zip Code L.COM	
	E-mail address: (to be used for future annual report no	tification)
For further information of	oncerning this matter, please c	all:	
JOSE ROSALES		786 2056618 Area Code Daytii	
Name o	f Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 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		Street Address:	
Registration S Division of C		Registration Se Division of Co	
P.O. Box 632		The Centre of	
Tallahassee, l	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

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

FILED 2024 APR 16 PH 3: 44

RV PAINTING AND SERVICE LLC

AND SERVICE LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

ability Company were filed on 05/24/2018	and assigned
wing:	
the limited liability company here:	
ords "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
ible:	
TADDRESS)	
<u> </u>	
	nter the name of the new registere
Enter Florida street a	ddress
City	ddress Florida Zip Code
	the limited liability company here: ords "Limited Liability Company." the designation able: TADDRESS)

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□Remove
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f an effective date i Note: If the date	f other than the s listed, the date must inserted in this blo tive date on the De	t be specific and ock does not n	cannot be prior teet the applica	to date of filing or able statutory fil	more than 90 daysing requirements	optional) safter filing.) Pursua s, this date will no	nt to 605.0207 i he listed as
nocument's effec		e date but not	an effective ti	me, at 12:01 a.m	on the earlier of	of: (b) The 90th (day after the
	a delayed effective	e date, nor mor					
erecord specifies			2024				
e record specifies ed is filed.			2024		ye of a member		