

L18000190330

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R. VILLOTE
OCT 08 2019

2019 OCT -7 PM 12:26

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TAG'S PAINTING, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

PATRICK J RICHARDS

Name of Person

TAG'S PAINTING, LLC

Firm/Company

1620 ORACLE DR

Address

RUSKIN, FL 33573

City/State and Zip Code

SHADOWLAB2012@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PATRICK J RICHARDS

813 505-2926

at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

TAG'S PAINTING, LLC

2019 OCT -7 PM 12:25

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

The Articles of Organization for this Limited Liability Company were filed on 08/08/2018 and assigned
Florida document number 118000190330.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1655 EAGLE TERRACE

CANTONMENT, FL 32533

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1655 EAGLE TERRACE

CANTONMENT, FL 32533

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: PATRICK J RICHARDS

New Registered Office Address: 1620 ORACLE DR

Enter Florida street address

RUSKIN, Florida 33573

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.

Patrick J. Richards
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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	TODD GORBY	1655 EAGLE TERRACE	<input checked="" type="checkbox"/> Add
		CANTONMENT, FL 32533	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MICHAEL VINING	3795 LEVINS RD MULBERRY, FL 33860	<input checked="" type="checkbox"/> Add
		CHANGE FROM MGR TO AMBR	<input type="checkbox"/> Remove
		CHANGE ADDRESS FROM 1620 ORACLE DR, RUSKIN	<input checked="" type="checkbox"/> Change
MGR	THOMAS GORBY	1655 EAGLE TERRACE, CANTONMENT, FL 32533	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		CHANGE ADDRESS FROM 16851 PEACEFUL VALLEY DR	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

THOMAS GORBY ADDRESS TO BE CHANGED FROM 16851 PEACEFUL VALLEY DR, WIMAUMA, FL
33598 TO NEW ADDRESS OF 1655 EAGLE TERRACE

MICHAEL VINING ADDRESS CHANGED FROM 16851 PEACEFUL VALLEY DR, WIMAUMA 33598
TO NEW ADDRESS OF 3795 LEVINS RD, MULBERRY, FL 33860.

ALSO CHANGE MICHAEL VINING TO AMBR FROM MGR

OCTOBER 3RD, 2019

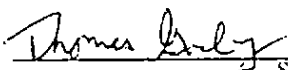
E. Effective date, if other than the date of filing: _____ (optional)

(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)(b)

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 OCTOBER 3RD, 2019



Signature of a member or authorized representative of a member

THOMAS GORBY

Typed or printed name of signee