<u>L18000223452</u>

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
	,	
(Cit	y/State/Zip/Phone	¥)
(Bu	siness Entity Name	e)
(Do	cument Number)	· · ·
Certified Copies	_ Certificates of	of Status
Special Instructions to	Filing Officer:	
L	Office Use Only	J



02/21/13--01022--020 ++25.00

2019

APPROVED AND FILED 2019 FEB 21 AN 4: 19 SECRETARY OF STATE SECRETARY OF STATE



CC)V	ER	LE	ΓT	ΈR

FO:	Registration Section	r .	•	• -	
	Division of Corporations				

J.A.R. Painting Solutions, LLC.
SUBJECT:

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:

Angel Garcia

Name of Person

Finn/Company

1127 Old England Loop

Address

Sanford, FL 32771

City/State and Zip Code

alexander.ieziah1314@email.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Enclosed is a check for the 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: 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

J.A.R. Painting Solutions, LLC.

(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 <u>9/20/2018</u> and assigned Florida document number <u>L18000223452</u>.

This amendment is submitted to amend the following:

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

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

er new principal offices address, if applicable: 5314 NE 12th Avenue incipal office address MUST BE A STREET ADDRESS) Ocala, FL 34479	5314 NE 12th Avenue
(Principal office address MUST BE A STREET ADDRESS)	Ocala, FL 34479
Enter new mailing address, if applicable:	5314 NE 12th Avenue

(Mailing address MAY BE A POST OFFICE BOX)

Ocala, FL 34479

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

Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	,
	, Flo	rida 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, <u>enter the title, name, and address of each person being added</u> or removed from our records:

MGR = Manager

r

<u>Title</u>	Name	Address	Type of Action
AMBR	Sarah Acevedo	1127 Old England Loop Sanford, FL 32271	🗎 Add
			🖸 Remove
			Change
			O Add
			Remove
			Change
			Add
			C Remove
			Change
			🖸 Add
			🗆 Remove
			Change
			🖸 Add
			🗆 Remove
			Change
			🖸 Add
			C Remove
			🗆 Change

 		5.0	
		ALC	019 FEB 2
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	큠
 ······		<u> </u>	$\tilde{\sim}$
		SET	
 		2017 S 217 S 217	-2
		ALSO	÷
	·		9

### 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) <u>Note:</u> 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.

February 18th	2019
	A.E.V.~
	Signature of a member or authorized representative of a member
Angel Garcia	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00