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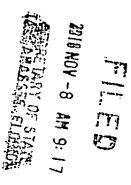
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COVER LETTER

SUBJECT: All details Painting ILC 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:
Fredesvindo Villanueva Rodniguez Name of Person
All de-terils Painting LLC Firm/Company
1202, 26th Avenue W Apt A
Bradenton, Flonida 34205 City/State and Zip Code
E-mail address: (to be used for future armulal report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please call: For further information concerning this matter, please call: For destring Villanue 19 Rodnigue Z Name of Person Area Code Daytime Telephone Number Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations

TO:

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

(Name of the Limited Liability Com (A Florida Limite	npany as it new appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Comparison for the Limited Liability Comparison of the Liabili	iability company here:	
The new name must be distinguishable and contain the world Limited Lia	iability Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1202, 26th Avenue Welt	
(Principal office address MUST BE A STREET ADDRESS)	1 Apt A. Braclenton, FL 3420	5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	Same as for incipal office. Same as for inci	· · · · · · ·
New Registered Office Address:	Enter Florida street address	
	, Florida	

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>	<u>Name</u>	<u>Address</u>	Type of Action
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Filing Fee: \$25.00