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| (F | Requestor's Name) | |
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| | Address) | |
| (/ | Address) | |
| ((| City/State/Zip/Phone #) | |
| PICK-UP | ☐ WAIT | MAIL |
| (1 | Business Entity Name) | |
| (1 | Document Number) | |
| Certified Copies | Certificates of | Status |
| Special Instructions | to Filing Officer: | |
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Office Use Only



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COVER LETTER

| Div | ision of Cor | porations | | |
|----------------|---------------|--|---|---|
| SUBJECT: | R.J. PORT |) PAINTING LLC | | |
| nonanci. | | Name of Lim | ited Liability Company | |
| The enclosed | l Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return | all correspo | ndence concerning this matter | to the following: | |
| | | RICHARD PORTO JR | | |
| | | | Name of Person | |
| | | R.J. PORTO PAINTING I | LC | |
| | | | Firm/Company | |
| | | 940 VILLAGE TRAIL 4 | -102 | |
| | | | Address | |
| | | PORT ORANGE, FL 3212 | 27 | |
| | | PORTOJRPAINTING@G | City/State and Zip Code MAIL.COM | |
| | | E-mail address; (| to be used for future annual report notif | ication) |
| For further in | iformation c | oncerning this matter, please co | all: | |
| КЕТТИ Е А | NDERSON | СРА | 203 373-1511 at () | |
| | Name o | f Person | Area Code Daytime | : Telephone Number |
| Enclosed is a | check for th | e following amount: | | |
| □ \$25.00 F | iling 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

PORTO PAINTING & POWERWASHING LLC

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

(A Florida Limited Liability Company)

FILED

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

. Florida

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

| $MG\dot{R} = M$ $AMBR = A$ | anager uthorized Member | | |
|----------------------------|----------------------------|-------------|----------------|
| <u>Title</u> | Name | Address | Type of Action |
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| Effective date, if other than the (If an effective date is fisted, the date mus Note: If the date inserted in this bl document's effective date on the D | ock does not me | et the applicab | date of filing or mor le statutory filing | (option e than 90 days after fil requirements, this d | al) ing.) Pursuant to 605.0207 ate will not be listed as |
| the record specifies a delayed The 90th day after the rec | | ite, but not a | an effective tir | ne, at 12:01 a.r | n. on the earlier o |
| Dated | | 2019 | | | |
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| | 1 | | | a member | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00