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COVER LETTER

то:	Registration Se Division of Cor					
CHD 112	RANDY A	ND BRANDY PAIN (ING LE	ť'			
SUBJE	C1;	ND BRANDY PAIN (INC.LE. Name of Lim	sted Liability Company			
The enc	losed Articles of	Amendment and feets care sub	mitted for filing.			
Please r	eturn all correspo	indence concerning this matter	to the following:			
		RAYMOND MORRIS iii				
			Name of Person			
			Firm/Company			
		16324 TURKEY OAK RI				
		Address				
		FOUNTAIN & 1/32438				
			City/State and Zip Code			
		FRIENDLYCORPORATE	FILING å,GMAHCOM to be used for future annual report notif	Testion		
For furt	her information o	oncerning this matter, please co		reaction y		
RAYM	OND MORRIS		850 3039658			
	Name o	f Person	at ()	e Telephone Number		
Enclose	d is a check for ti	ne following amount:				
■ \$25	.00 Filing Fee	☐ \$30.00 Fiftag Fee & Centificate of Status	☐ \$55,00 Filing Uce & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
		ING ADDRESS;	STREET/COURI Registration Sectio			

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle
Turlahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RANDY AND BRANDY PAINTING LLC		
(<u>Name of the Limited Liability Con</u> (A Florida Limite	npany as it now appears on our records.) ad Liability Company)	
he Articles of Organization for this Limited Liability Compa	ny were filed on 02-26-2019	and assigned
lorida document number 1.19000056238		
his amendment is submitted to amend the (o.lowing).		
. If amending name, enter the new name of the limited li	ability company here:	
RANDY MORRIS PAINTING LLC		
he new name must be distinguishable and coot in the words "Limited Lin	ability Company." the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
<u>Principal office address MUST BE A STREET AL DRESS)</u>		
		201
Inter new mailing address, if applicable:		2019
Mailing address MAY BE A POST OFFICE BOX)		
		<u>ن</u> -
		<u></u>
. If amending the registered agent and/or registered	office address on our records,	enter the name of the p
egistered agent and/or the new registered office oddress h		37
Name of New Registered Agent:		<u> </u>
Many Danierana d Office Validador		
New Registered Office Address:	Enter Florido street address	
	Elseni	ida
	. Flori	iđa 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, 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>	Address	Type of Action
VP	BRANDY HICKMAN	16324 TURKEY OAK RD , FOUN	Add
			<u></u>
			☐ Change
			Remove
			☐ Change
			□ Remove
			☐ Change
			
			□ Remove
			Change
			□ Add
			☐ Remove
			Change
		·	
			☐ Remove
			□ Change

CHANGING NAME OF B	USINESS RANDY MORR		
			· · · · · · · · · · · · · · · · · · ·
			
»—————————————————————————————————————			
			
ffective date, if other than the an effective date is listed, the date maintenance of the date inserted in this becoment's effective date on the light	block does not meet the applie	to date of filing or more than 9 able statutory filing require	(optional) Odays after filing.) Pursuant to 605.020 ments, this date will not be listed :
e record specifies a delaye The 90th day after the re		t an effective time, at	12:01 a.m. on the earlier
05/13/2019 ated	2019		
area	A C Mons III	_ ·	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00