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COVER LETTER

TO:	Registration Section Division of Corp		,	
0111S 1F		K&N PROFESSIONAL PAINTI	KG L.L.C	
SUBJE	:C1:	Name of Limited	Liability Company	
The en	closed Articles of A	mendment and fee(s) are submit	tted for filing.	
Please	return all correspon	dence concerning this matter to	the following:	
		НОІ	IN K SOTO	
			Name of Person	
		K&N PROFESS	IONAL PAINTING L.L.C	
			Firm/Company	
		3753 W. INTERNATIONAL	SPEEDWAY BLVD. SUITE#13	
		DAYTONA BEACH, FL 321	Address 124	2019 HAY 23 PH 12: 05
			City State and Zip Code	Y 23 P
			112569@GMAIL.COM De used for future annual report notification)	ED
For fur	ther information co	ncerning this matter, please call:		H 12: 0
	JOHN K SC	OTO	386 220-0206	· 35
	Name of	Person	at () Area Code Daytime Telephone Number	
Enclose	ed is a check for the	following amount:		
■ \$23	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certified	ite of Status &
	Registra Division P.O. Boy	NG ADDRESS: tion Section of Corporations x 6327 see, F1, 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

K&N PROFESSIONAL			
(<u>Name of the Limited Liability C</u> (A Florida Lii	ompany as it now appear	s on our regords.)	
(STOCHARTS)	med manney company)		
The Articles of Organization for this Limited Liability Com	pany were filed on	04/15/2019	and assigned
Florida document number 1.19000102269			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	l liability company he	<u>re</u> :	
The new name must be distinguishable and contain the words "Limited	Liability Company," the de	esignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			201
			-11 JE 32
(Principal office address MUST BE A STREET ADDRES	<u></u>		
			<u> </u>
Enter new mailing address, if applicable:			
	-		<u> </u>
(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		our records, <u>ente</u>	r the name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	-
		F1'.1.	
	City	Florida _	Zip Code
New Registered Agent's Signature, if changing Registered A	·		.,
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and com accept the obligations of my position as registered agen being filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of as provided for in C	my duties, and Lan Thapter 605, F.S. O	n familiar with and r, if this document is
Ī	Changing Registered Ag	ent, <u>Signature of New I</u>	Registered Agent

Page 1 of 3

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
MGRM	JENNIFER M. TORRES	2609 VAUGHN AVE	⊟ Add
		DELTONA FL 32725	B Add
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reffecti <u>te:</u> If t	date, if other than ive date is listed, the da the date inserted in the is effective date on	te must be specific : his block does no	and cannot be pot meet the app	dicable statuto	ing or more than ry filing requi	(opti 190 days afte rements, thi	r filing.) Pursi	uant to 605 tot be liste	.020 ed a
recor	d specifies a del Oth day after the			not an effec	ctive time,	at 12:01	a.m. on tł	ne earlie	er o
			2019						
he 90	MAY 20	,		1// .					
he 90	MAY 20	ZK		<i></i>					
		Signature of JOHN K S	f a member or	uthorized repres	entative of a me	ember			

Page 3 of 3

Filing Fee: \$25.00