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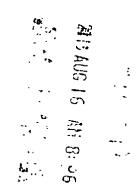
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(i	Business Entity Name)	
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COVER LETTER

то:	Registration Secti Division of Corpo		d		
SUBJ	ECT:	Prometheus Name of Limit	Painting ded Liability Company		
The er	nclosed Articles of Ar	nendment and fee(s) are subn	nitted for filing.		
Please	return all correspond	ence concerning this matter t	o the following:		
		Fabi	Name of Person		
		<u> </u>	rometheus Firm/Company	Painting	
		13236	5. W. 87.	th terra	ce
		Mia	City/State and Zip Code	33183	
		E-mail address: (to	Fabio ayaha o be used for future annua	D o COM I report notification)
For fu	rther information con	cerning this matter, please ca	II:		
	Fabio 1 Name of P	<u>Zaveci</u>	at (<u>786</u>) Area Code	US7- Daytime Telep	hone Number
Enclos	sed is a check for the	following amount:			
□ \$2	25.00 Filing Fee	30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is en		□ \$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

TO ARTICLES OF ORGANIZATION

Prometheus Pantina

(Name of the Limited Liability Con (A Florida Limit	n <mark>pany as it now ap</mark> ed Liability Compa	opears on our reco	ords.)			
The Articles of Organization for this Limited Liability Compa	any were filed or	05/1	3/20	19	and as:	signed
Florida document number <u>L19000129014</u> .						
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the limited li	ability compan	<u>y here</u> :				
Prometheus Paint The new name must be distinguishable and contain the words "Limited Li	ing Ll	_ C				
The new name must be distinguishable and contain the words "Limited Li	ability Company,"	the designation *1.	LC" or the	abbrevi	ation "L	.L.C."
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADDRESS)	<u></u>					
				at	<i>6</i> 27	
Enter new mailing address, if applicable:				- ; ;	772×	
(Mailing address MAY BE A POST OFFICE BOX)				-	75°	• .
					מי	
			_	2	FR - CO	ا مند موجود
B. If amending the registered agent and/or registered registered agent and/or the new registered office address h	office address <u>iere</u> :	s on our reco	rds, <u>ente</u>	r the	name යා	of the no
4	-	0	r	•	-	
Name of New Registered Agent:	rabio	Kaucc	1		.	
New Registered Office Address:	Fabio 4900 Nw	79+4	4ve			
	Enter	r Florida street ada	tress			
	Doral	,	Florida _	<u>ر </u>	ip Code	<u>6</u>
New Registered Agent's Signature if changing Registered Age	nt·					

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with th 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Fabio Raucci	4900 NW 79 Ave Doral FL	Add
			Remove
			Change
MGR	Aaron Gutierrez	4900 Nw 79 Ave Doral, FL	Add
			E Kemove
			Change
M6R	Donald F. Hung	4900 NW 79 Ave Donal	FL 🗆 Add
			Kemove
		<u> </u>	Change
			🗆 Add
			□ Remove
			Change
			□ Remove
			☐ Change
	 		Add
			Change

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Effective date if a	ther than the date of filing: (optional)
If an effective date is lis	ted, 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
Note: If the date ins	erted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective	e date on the Department of State's records.
the record specifi	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
) The 90th day a	fter the record is filed
,	
00 1	2-19/Aug 12 ZOIG. PROSECCE
Dated O	-19/ /+ug [L . LOIG .
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	· Statecce
	Signature of a member or authorized representative of a member
	Fabio Raucci Typed or printed name of signee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00