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COVER LETTER

	INTERS LLC		
URJECT:	Name of Limit	ed Liability Company	
ha anclosed Articles of	Amendment and fee(s) are subn	auted for filing.	
	ondence concerning this matter t		
	BRENDA LOPEZ		
		Name of Person	
	LOPEZ PAINTERS LLC		
	4,2,4	Firm/Company	·····
	2805 51ST ST SW		
		Address	
	NAPLES, FL 34116		
		City/State and Zip Code	
	ASAPACCOUNTING@M	E.COM To be used for future unutual report north	(vanaa)
For Surber information	b-mail address: () concerning this matter, please co		(Cathon)
BRENDA LOPEZ		239 961-7783	
Name of Person		at () Area Code Daytime	: Telephone Number
Enclosed is a check for			T CAN DO PINE A FACE
□ \$25.00 Filing Fee	■ \$30,00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy additional copy is enclosed.	☐ \$60.00 Filing Fee. Certificate of Stat Certified Copy (additional copy is the

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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 Fallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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Part of the second	5 	,2 _{/1}

LOPEZ PAINTERS LLC
(Name of the Limited Limbility Company as it now appears on our records.) (A Florida Limited Limbility Company)
The Articles of Organization for this Limited Liability Company were filed on 07/30/2019 and ass Florida document number L19000193905
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liabitity Company," the designation "E.I.C" or the abbreviation "L.
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enor Florida sireet address
, Florida
City Zip Cole 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 compl provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this docum 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.

or removed fi	rom our records:	æd to munuge, <u>enter the title, name, and</u>	address of each person
MGR = Mu AMBR = Au	nager thorized Member		
<u>Title</u>	Name	Address	Type
MGR	ISAIAS LOPEZ	2805 51ST ST SW NAPLES, FL 34116	Ac
			Re
			Re
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Page 3 of 3

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