

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000248956 3)))



H220002489563ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : TAX CONTROLLER INC
Account Number : 120210000142
Phone : (954) 301-1848
Fax Number : (954) 532-9458

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
LIBANIO SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$25.00

2022 JUL 22 PM 1:16

2022 JUL 22 PM 12:48

APPROVED
AND
FILED

COVER LETTER

(((422000248956 3)))

TO: Registration Section
Division of Corporations

SUBJECT: LIBANIO SERVICES, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GUILHERME LIBANIO

Name of Person

LIBANIO SERVICES, LLC

Firm/Company

5851 HOLMBERG RD APT 4021

Address

PARKLAND, FL 33067

City/State and Zip Code

libaniogui@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GUILHERME LIBANIO

407 818-8083
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(((H22000248956 3)))

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

LIBANIO SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)The Articles of Organization for this Limited Liability Company were filed on 10/10/2019 and assigned
Florida document number L19000253006

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

LIBANIO PAINTING LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5851 HOLMBERG RD APT 1314

PARKLAND, FL 33067

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5851 HOLMBERG RD APT 1314

PARKLAND, FL 33067

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

MICHEL ALESSANDRO LIBANIO

New Registered Office Address:

5851 HOLMBERG RD APT 1314

Enter Florida street address

PARKLAND

City

Florida

33067

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

2022 JUL 22 PM 12:48

API REVIEW
FILED

(((H22000248956 3)))

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 (j)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated JULY 18, 2022



Signature of a member or authorized representative of a member

GUILHERME LIBANIO

Typed or printed name of signer