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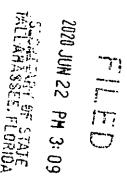
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COVER LETTER

	egistration S vision of Co					
SUBJECT		TING SERVICES. LLC				
SOBJECT		Name of Lin	nited Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are sub	omitted for filing.			
		ondence concerning this matter	-			
		JESENIA CALLE				
			Name of Person			
				2020 JUN 22		
			Firm/Company	JUN 22		
		10360 SW 186 STREET #	#971935	1 1 1		
			Address	700		
		MIAMI, FL 33197		PH 3: 10 EFFECTIONS		
			City/State and Zip Code			
		JESENIACALLE07@GMA	AIL.COM			
		E-mail address: (to be used for future annual report not	ification)		
For further i	information c	oncerning this matter, please c	all:			
RYAN LEI	E SNIDER		754 610-7442			
	Name o	f Person		e Telephone Number		
Enclosed is	a check for tl	ne 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)		
	niling Addres		Street Address: Registration Se	ction		
Registration Section Division of Corporations		Registration Section Division of Corporations				
	O. Box 632		The Centre of 7			
Та	llahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810		

Tallahassee. FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

RLS PAINTING SERVICES, LLC	
(<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w Florida document number $\frac{\text{L}19000256902}{\text{L}19000256902}$.	vere filed on 10/11/2019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabili	ty company here:
RLS BUILDING SERVICES, 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:	222
(Principal office address MUST BE A STREET ADDRESS)	mo P
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	REFE
B. If amending the registered agent and/or registered office adengent and/or the new registered office address here:	dress on our records, <u>enter the name of the new registere</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	. Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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
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