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SEP 19 2023

A. PARISHANI
OCT 2 8 2023

COVER LETTER ...

Division of Corporations
SUBJECT: TD painting & Remodeling LLC Name of Limited Liability Company 3
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
₩ 10 A N/F
Name of Person
Name of Person
Firm/Company
10664 Nacha Ave
Address
Orlando FL 32825 City/State and Zip Code
E-mail address (to be used for future annual report notification)
For further information concerning this matter, please call:
To further information concerning was institutely better
Ty Dang at (408) 908 8205 Name of Persont Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Scrifficate of Status S55.00 Filing Fee Scriffied Copy (additional copy is enclosed) S50.00 Filing Fee Scrifficate of Status Scriffied Copy (additional copy is enclosed) S60.00 Filing Fee Scrifficate of Status Scriffied Copy (additional copy is enclosed)

TO:

Registration Section

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 cm = 2.3 KH =

TD Painting	X Kemodeling LLC -
(Name of the Limited Liability Con (A Florida Limit	npany as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compared Florida document number 1, 2,00,00,00 %. This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited	any were filed on and assigned
At I will have a series of the	*
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	10664 Nadia Ave
(Principal office address MUST BE A STREET ADDRESS)	ortando it gasto
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
agent and/or the new registered office address here:	ce address on our records, enter the name of the new registered
Name of New Registered Agent:	Ty Dourg
New Registered Office Address: 1064	Ty Doing Ly Neicha Ave sidewide Fit 30825. Enter Florida street address
	Orlando Florida FL 32825

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 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>	Name	Address	Type of Action
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ffec	tive date, if other than the date of filing: (optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purst	uant to 605.020
iote:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will r	not be listed a
ocui	nent's effective date on the Department of State's records.	
rece	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th	h day after the
	iled.	
latec	-6.9/11/2025	
acc	Signature of a member or authorized representative of a member	
	Signature of a member or authorized representative of a member	
	Typed or printed name of signee	

Filing Fee: \$25.00