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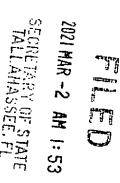
(0,	equestor's Name)	
(Ke	equestors Name)	
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PICK-UP	WAIT	MAIL
(Bi	usiness Entity Name)	·
,		
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Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
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<u> </u>		

Office Use Only



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03/01/21--01024--019 **25.00



COVER LETTER

SUBJECT: <u>Br</u> e	ward County	Painting LLC	
		, , , , , , , , , , , , , , , , , , , ,	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	William (Source Source Name of Person	
	Brevard Ca	waty Painting	LLC_
	1455 Sac	Sig CT NE	
	Palm Bay	City/State and Zip Code	
	don burrous:	Services (agmail to be used for future annual deport notifi	. con
For further information e	oncerning this matter, please c	•	
William_ Name o	Burous f Person	at (34) 704 - Area Code Daytime	-6492 Telephone Number
Enclosed is a check for th	ne following amount:		
S25.00 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)

TO:

Registration Section Division of Corporations

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 FILED

2021 MAR -2 AM 1:53

nting LLC
vasit non appears on our creents of OF STATE TALLAHASSEE, FL
were filed on <u>03/03/2020</u> and assigned
lity company here:
ty Company." the designation "LLC" or the abbreviation "L.L.C."
ddress on our records, <u>enter the name of the new registered</u>
n Burrows
Sawin Ct IVE Emer Florida street address Bay Florida 32805
Gay Florida 32805 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

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
᠓ᢘᡌ	William Burrows	1455 Sawin Ct NE	-X Add
		Palm Bay, FL 32905	[]Remove
			□Change
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			Петюче
			Change
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			C) Cit

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Note:	ive date, if other than the date of filing: \$\frac{17/Q}{17/Q}\$ (optional) (ective 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 (3)(17) (3)(17) (3)(17) (3)(17) (4
f the recordecord is fi	d 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 led,
Dated	February 17 2021
	Signature of a member or authorized representative of a member
	William Burrous Typed or printed name of signee

Filing Fee: \$25.00