Division of Corporations

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To:

Division of Corporations

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From:

Account Name : PARASEC

Account Number : I20180000086

Phone : (916)576-7000

Fax Number : (800)603-5868

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

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Corporate Filing Menu

To: 18506170383 From: 19165767051 Date: 06/23/20 Time: 8:14 AM Page: 03/05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

	4920 J	10.1.23 AF 10.55
Paint Peo	ple LLC	14F, 10. 55
(Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our record Liability Company)	<u> </u>
The Articles of Organization for this Limited Liability Company L20000133277 Florida document number	were filed on 05/18/2020	and assigned
This amendment is submitted to amend the following:		·
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LU	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	8518 Gibsonton Dr Lot	
(Principal office address MUST BE A STREET ADDRESS)	Gibsonton FL 33534	
Enter new mailing address, if applicable:	8518 Gibsonton Dr Lot 1	47
(Mailing address MAY BE A POST OFFICE BOX)	Gibsonton FL 33534	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address here. Name of New Registered Agent:	office address on our record	ds, enter the name of the
New Registered Office Address:	Enter Florida street addr	ess
	, Florida	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete	ree to act in this capacity. If e performance of my duties, e performance of my duties,	ana i am jaminar mini a

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

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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 2020 JL . 25 ATT 10: 55	Type of Action	
			Add	
			☐ Remove	
			Change	
		□ Remove		
		Change		
		Remove		
		Change		
		Remove		
		Change		
		Remove		
			□ Change	
			Add	
		□ Remove		
			☐ Change	

To: 18506176383 From: 19165767051 Date: 06/23/20 Time: 8:14 AM Page: 05/05

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

2029 JUL 23 Ali 10: 55

E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date.) Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	(optional) te of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) statutory filing requirements, this date will not be listed as the
If the record specifies a delayed effective date, but not an (b) The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier of:
Dated	ricitative of a member
Typed or printed no	me of signee

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