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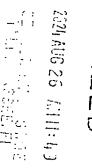
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COVER LETTER

TO:

Registration Section

Division o	of Corporations			
	sion painting			
SUBJECT:	Name of Lir	Name of Limited Liability Company		
The enclosed Articl	les of Amendment and fee(s) are su	bmitted for filing.		
Please return all con	rrespondence concerning this matte	r to the following:		
	Diana C Pena-Abel			
		Name of Person		
	Precision Painting			
	-	Firm/Company	_	
	13810 Sutton Park Dr N	unit 1321		
		Address		
	Jacksonville Fl, 32224			
		City/State and Zip Code	_	
	precisionpainting83@gma E-mail address:	il.com tto be used for future annual report not	itication)	
For further informa	ntion concerning this matter, please			
Diana C Pena-Abe	1	904 3151368		
	Name of Person	at () Area Code Daytin	ne Telephone Number	
Enclosed is a check	k for the following amount:			
■ \$25.00 Filing I	Fee S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional copy is enclosed)	
<u>Mailing A</u> Registra	Address: ition Section	<u>Street Address:</u> Registration So	ection	
Division of Corporations		Division of Co	Division of Corporations The Centre of Tallahassee	
P.O. Box 6327 Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Precision Painting 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 $\frac{11/24/2020}{1}$ and assigned Florida document number 1.20000371219 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Twenty Terra LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 13810 Sutton Park Dr N unit 1321 Enter new principal offices address, if applicable: Jacksonville FL 32224 (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: N/A Name of New Registered Agent: N/A 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.

Cirv

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
		- · · ·	□Add
			□Remove
			□Change
			□Remove
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			□Remove
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	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing: (optional) ctive 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)(b) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
If the record record is file	I 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 ed.
Dated _	08/72/24
	Signature of a member or authorized representative of a member
	Diana C Pena-Abel
	Typed or printed name of signce