

L21000020417

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

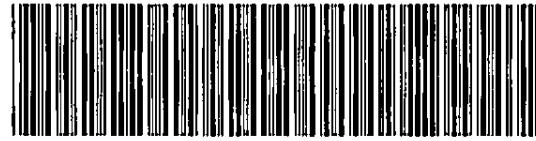
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21 MAR -5 PM 2:51
DIVISION OF CORPORATIONS
STATE OF TEXAS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Faithway Powder Coatings, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Witt
Name of Person

Faithway Powder Coatings, LLC
Firm/Company

1129 SE Ormond Witt RD
Address

Lake City, FL 32025
City/State and Zip Code

amwitt97@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Witt at (386) 758-3973
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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)

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

Faithway Powder Coating LLC 21 MAR -5 PM 2:51
(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 January 7, 2021 and assigned Florida document number L21000020417.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

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:

(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:

Name of New Registered Agent:

Andy Witt

New Registered Office Address:

1129 SE Diamond Way RD

Enter Florida street address

Lake City
City

Florida

32025
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 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

SECRETARY OF STATE
DIVISION OF CORPORATION

21 MAR -5 PM 2:51

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Andy Witt	1129 SE Ormond Witt RD	<input type="checkbox"/> Add
		Lake City, FL 32025	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Andy Witt	1129 SE Ormond Witt RD	<input type="checkbox"/> Add
		Lake City, FL 32025	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AP	Andy Witt	1129 SE Ormond Witt RD	<input type="checkbox"/> Add
		Lake City, FL 32025	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Mary Witt	1129 SE Ormond Witt RD	<input checked="" type="checkbox"/> Add
		Lake City, FL 32025	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

SECRETARY OF STATE
DIVISION OF CORPORATIONS

So when it may concern,

it don't mean to be

so confusing. When I first set up Surbiz I listed my husband on every position possible. Now our bank is telling me they won't accept that to open up a business account. So then I sent in a check the week of 2/18/2021 - to list myself (Mary Witt) as Registered agent. My bank still won't accept this without removing my husband Andy Witt off everything except for one position. What I'm trying to get done is, have my husband Andy Witt listed as Registered Agent and myself - Mary Witt as AMBR. If possible, please add our EIN-85-3864857 Thank you + God Bless - 386-758-3973

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated March 3, 2021

Mary Witt

Signature of a member or authorized representative of a member

Mary Witt

Typed or printed name of signee