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Special Instructions to	Filing Officer:	
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21 JUN -2 AM 12: 20

COVER LETTER

то:	Registration Section Division of Corporations
SUBJE	CT: America's Painting LLC Name of Limited Liability Company
The enc	losed Articles of Amendment and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Eli Ramilez Roblelo Name of Person
	America's Painting LLC Firm/Company
	6620 Jupiter Gondens Blud Apt A
	Jupiter FL 33458 City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For furtl	ner information concerning this matter, please call:
	Eli Ramirez Roblero at (561) 803 - 5671 Name of Person Daytime Telephone Number
Enclosed	I is a check for the following amount:
18 \$25	00 Filing Fee Sand Filing Fee
	Mailing Address: Registration Section Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION

America's (Name of the Limited	Painting	LLC	21 JUN -2	4M 12: 20
(<u>Name of the Limited</u> (A	Liability Company Florida Limited Lia	as it now appears bility Company)	on our records.)	
The Articles of Organization for this Limited Liab		ere filed on	1-20-20	21 and assigned
This amendment is submitted to amend the follow	/ing:			
A. If amending name, enter the new name of t	he limited liabili	ty company her	<u>e</u> :	
The new name must be distinguishable and contain the wor	ds "Limited Liability	Company." the de-	signation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applical	ole:			
(Principal office address MUST BE A STREET	ADDRESS)			
			· -	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	· ·		
			-	
B. If amending the registered agent and/or regagent and/or the new registered office address		dress on our re	cords, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:				
New Registered Office Address:		F . E.	da street address	
		Enter Flori		
		City	, Florida	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:

	Manager - Authorized M	l ember		21 JUN -2	1 1 1 2 2 3 A 2 3	
<u>Title</u>	<u>Name</u>		Address	21 JUH -2	4H 15: 50	Type of Action
AMBR	Eli	Raminez Robleno	<u>6620</u> Apt	Jupiter Ga		🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 21 JUH - 2 AH 12: 20
21 JUH -2 AM 12. 20
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 of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) 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.
5-21-7021
Dated
X (A)
Signature of a member or authorized representative of a member
Eli Ramirez
Typed or printed name of signec

Filing Fee: \$25.00