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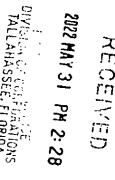
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COVER LETTER

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eus wee	Emma,Jake	and Kyle General Services LI	.C	
SUBJECT:		Name of Lim	ited Liability Company	,
The enclose	d Articles of ,	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		Danilo A Vargas		
			Name of Person	
			Firm/Company	
		5206 W 26th Ave		
			Address	
		Hialeah Fl 33016		
			City/State and Zip Code	
		danilo23@comeast.net		
			to be used for future annual report notifi	cation)
For further i	information co	oncerning this matter, please ca	all:	
Danilo A V	argas		786 385-3223 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for th	e 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)

P.O. Box 6327

Division of Corporations

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Emma, Jake and Kyle General Services 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 $\frac{01/25/2021}{1}$ and assigned Florida document number 1.21000044624 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Emma, Jake and Kyle Painting Services LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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: New Registered Office Address: Enter Florida street address _____, Florida ____ City

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
			□ Add
			Remove
			Change
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	l specifies a dela th day after the		ate, but not	an effe ctive ti	me, at 12:0	1 a.m. on the	e earlier o
ed	27/2022			. •			
		Das Signature of a n	rilo A Va nember or authori	rgas	of a member		
	Danilo A Vargas						