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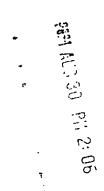
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COVERIFTER

COVERCETTER
TO: Registration Section Division of Corporations
SUBJECT: Live ne Painting & Services LL C 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:
Name of Person Cioence Iceinting & Sonvices Firm'Company 18330 Swy Street Address Address Ciry State and Zip Code Lugga Accinting 5030 Gyrail. (um E-mail address to be used for future funnual report notification)
For further information concerning this matter, please call
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status Certificate of Status & Certificate of St

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

Guera Painting	& Service LLC
(Name of the Limited Liability Comp.	ans as it now appears on our records.) Liability Company
The Articles of Organization for this Limited Liability Company	were filed on and assigned
Florida document number <u>L 210001 ks 16 7</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited has	oility company here:
The new name must be distinguishable and contain the words "Limited Liab:	lity 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 agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent:	tal, ro (oto River
New Registered Office Address:	(Same) 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.

hanging 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

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-6	Salute S	Signature of a member or auth	orized representat	ive of a member		

Filing Fee: \$25.00