

L21000221719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

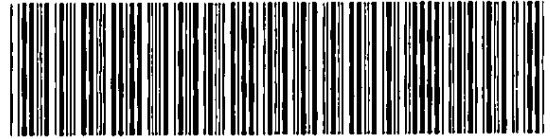
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/06/23--01001--007 **25.00

RECEIVED

2023 APR -5 PM 4:21

ALABAMA

FILED

2023 APR -5 AM 9:47

ALABAMA

4/6/2023

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from this account: I20210000160: \$ 25.00

Authorization Signature: 

BUBBLE CITY SOAP LLC

L21000221719

BUSINESS NAME

DOCUMENT #

 Certified Copy of Articles of Organization

 Certificate of Status

NEW FILINGS

 Profit Corp
 Not for Profit
 Limited Liability
 Domestication
 Other
 CORP
 LLLP

AMMENDMENTS

 X Amendment
 Resignation of R.A. Officer/Director
 Change of Registered Agent
 Revocation of Dissolution
 Merger
 Conversion
 Amended and restated Articles
 Statement of Authority

OTHER FILINGS

 Annual Report
 Fictitious Name
 APOSTILLE
 Country

REGISTRATION/QUALIFICATIONS

 Foreign filing
 Limited Partnership
 Reinstatement
 Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BUBBLE CITY SOAP 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:

RODRIGO P SILVA

Name of Person

RS ACCOUNTING AND TAX SERVICES

Firm/Company

10 FAIRWAY DRIVE

Address

DEERFIELD BEACH FL 33441

City/State and Zip Code

info@rsaccountingtax.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RODRIGO P SILVA

Name of Person

at (954) 623-7615

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 5, 2023

FLORIDA CAPITAL COURIER SERVICES, INC

SUBJECT: BUBBLE CITY SOAP LLC
Ref. Number: L21000221719

We have received your document for BUBBLE CITY SOAP LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

The money in your account is insufficient to cover the cost of filing this document. Please send additional money to cover this particular filing and other filings you wish to process.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 423A00007739

RECEIVED
2023 APR -5 PM 3:56
U. S. DEPARTMENT OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BUBBLE CITY SOAP LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

2023 APR -5 AM 9:47

The Articles of Organization for this Limited Liability Company were filed on 05/12/2021 and assigned
Florida document number L21000221719.

This amendment is submitted to amend the following:

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

JPL PAINTING AND RESTORATIONS LLC

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)

8051 PRIMROSE BLVD

LABELLE

FLORIDA 33935

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8051 PRIMROSE BLVD

LABELLE

FLORIDA 33935

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:

RS ACCOUNTING AND TAX SERVICES INC

New Registered Office Address:

10 FAIRWAY DRIVE STE 306

Enter Florida street address

DEERFIELD BEACH

City

Florida 33441

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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	JOAO N ALVES DE FREITAS	8051 PRIMROSE BLVD	<input checked="" type="checkbox"/> Add
		LABELLE FLORIDA 33935	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	PATRICIA LIMA TORRES	9900 RIVERSIDE DRIVE APT 214	<input type="checkbox"/> Add
		CORAL SPRINGS, FL 33071	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

(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)

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.

PATRICIA LUNA TORRES
Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00