## h21000224479

(Requ	iestor's Name)	
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(City/s	State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busin	ness Entity Nan	ne)
(Доси	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer:	

Office Use Only



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22 APR -5 PM 2: 59

T. MATTHEWS APR 19 2022

## COVER LETTER

TO:

**Registration Section** 

Division of Cor	porations		
DONE RIG	HT PAINT & POWERWASH	ING LLC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	JONATHAN VITALE		
		Name of Person	
	DONE RIGHT PAINT &	POWERWASHING LLC	
•		Firm/Company	
	208 LONDON DR		
		Address	<del></del>
	PALM COAST, FL 32137		
		City/State and Zip Code	<del> </del>
	vitalej1982@gmail.com		
		to be used for future annual report not	ification)
For further information c	oncerning this matter, please ca	all:	
JONATHAN VITALE		386 931-9609	
Name o	f Person		ne Telephone Number
Enclosed is a check for th	ne 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 Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro Tallahassee, FI	rporations Fallahassee se Street, Suite 810

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

SECRETARY OF STATE DIVISION OF CORPORATIONS

22 APR -5 PM 2:59

## DONE RIGHT PAINT & POWERWASHING LLC

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

Florida document number L21000224479	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the <u>limited</u> liab	oility company here:	
N/A			
The new name must be distinguishable and contain the	words "Limited Liab	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		N/A	
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE BOX)			
	ragiotared office	add	a and and be a name of the control of the
R. If amonding the registered agent and/or		MARIEPSS ON OUE EPCOFO	s, enter the name of the new register
B. If amending the registered agent and/or agent and/or the new registered office addre	ess here:	address on our record	o, enter the name of the new register
B. If amending the registered agent and/or agent and/or the new registered office addr	ess here:	address on our record	s, emer the name of the new register
B. If amending the registered agent and/or agent and/or the new registered office addressed agent.  Name of New Registered Agent:	ess here:	address on our record	
agent and/or the new registered office address  Name of New Registered Agent:	ess here:	address on our record	
agent and/or the new registered office addre	ess here: N/A	Enter Florida str	
agent and/or the new registered office address  Name of New Registered Agent:	ess here: N/A	Enter Florida str	eet address
agent and/or the new registered office address  Name of New Registered Agent:	N/A N/A	Enter Florida str City	

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

Type of Action
□ Add
<b>=</b> Remove
□Change
<b>=</b> Add
□Remove
Change
□Add
Remove
Change
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ective date, if other than the neffective date is listed, the date muste: If the date inserted in this blument's effective date on the December 2.	t be specific and cannot be prior took does not meet the applica	o date of filing or more than 90 ble statutory filing requirem	<b>(optional)</b> days after filing.) Pursuant to 605.020 ents, this date will not be listed a
cord specifies a delayed effectives filed.	e date, but not an effective tin	ne, at 12:01 a.m. on the earli	er of: (b) The 90th day after the
MARCH 31	2022		
ha Pa V	Ad	<u>-</u> '	
A COUNTY IN	Signature of a member or author		