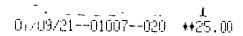
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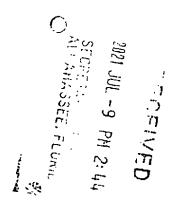
(Requestor's Na	me)
(Address)	
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(City/State/Zip/F	Phone #)
PICK-UP WAIT	T MAIL
(Business Entity	Name)
(Document Nun	her)
(Document Num	idei)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Officer	·:

Office Use Only



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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	rporations		•
#1 Painting SUBJECT:			
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
		Chuck S Thompson	
		Name of Person	
		Firm/Company	
	9288 Cristal Spring LLC		
		Address	
	Jacksonville, FL 32221		
	chuckthompson089@gmail	City/State and Zip Code	
		to be used for future annual report	notification)
For further information c	oncerning this matter, please c	all:	
Chuck Thompson		904 438-0789	
Name o	f Person	Area Code Day	ytime Telephone Number
Enclosed is a check for the	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		Street Address Registration	
Division of C	orporations	Division of O	Corporations
P.O. Box 632	.7	The Centre of	of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	n Painting LLC
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
he Articles of Organization for this Limited Liability Corida document number L21000289404	company were filed on 06/22/2021 and assign
-	<u>_</u> ·
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the lim	ted liability company here:
Steven Painting Serv	
ne new name must be distinguishable and cont ain the words "Lim	ited Liability Company," the designation "LLC" or the abbreviation "L.1C
nter new principal offices address, if applicable:	9288 Crystal Springs Rd
Principal office address MUST BE A STREET ADDR	(ESS) Jacksonville, FL 32221
nter new mailing address, if applicable:	9288 Crystal Springs Rd
Mailing address MAY BE A POST OFFICE BOX)	Jacksonville, FL 32221
If amonding the maintain down and and a section of	
ent and/or the new registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new re
	<u>. 19</u>
Name of New Registered Agent:	
New Registered Office Address: 9288 C	Crystal Springs Rd
	Enter Florida street address CO 111
Jackso	nville, Florida FL3222103
	City Tip 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.

H 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>	Type of Action
AMBR	THOMPSON, CHUCK S	9288 Crystal Springs Rd	□Add
		Jacksonville, FL 32221	□Remove
			■ Change
			□Add
			□ Remove
			□Change
			□ Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			
			Remove
			□Change
			□Add
			□Remove
			□Change

r	eceive an TAX ID number my name has to change. Also address need correction LLC on all address should be
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ctiv	ve date, if other than the date of filing:
<u>::</u>	ctive 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 605.02 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed
me	ent's effective date on the Department of State's records.
ord	specifier a deleved effective data but not as a CC of a discussion of 12.01
file	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
C	77/09/2021
d _)7/09/2021 ———————————————————————————————————
	Signature of a prember or authorized representative of a member