

L21 000 244915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

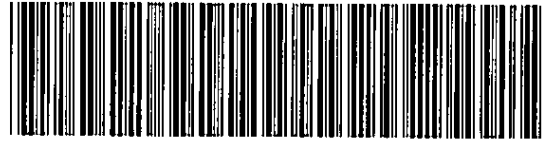
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

S.C.
08/12/21



800370491478

07/26/21--01020--017 **30.00

08/12/21 AM 11:24



COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Kool Paint 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:

Eduardo Jose Calcano Delacruz
Name of Person

Kool Paint LLC
Firm/Company

8036 Dancing Wind Lane Unit 805
Address

NAPLES FL 34119 U.S
City/State and Zip Code

Cynthia Cesar y @ yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cynthia Cesar at (786) 710-1854
Name of Person 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

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

Kool Paint 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 June 29th 2021 and assigned Florida document number L21000299918.

This amendment is submitted to amend the following:

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

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)

8036 Dancing Wind Lane
Unit 805 Naples FL 34119 US

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

8036 Dancing Wind Lane
Unit 805 Naples FL 34119 US

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 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>
MGR	eduardo Jose delacruz calcano	8036 Dancing wind lane	<input type="checkbox"/> Add
		Unit* 805 neptus FL 34119 US	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Cinthia cesar	8036 Dancing wind ln	<input type="checkbox"/> Add
		unit 805 neptus FL 34119 U.S	<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
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

-25/11/20

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Updating documents because somewhere it was showing
U.N instead of U.S (United States) and also
when filed i put Eduardo as CEO and me
Cynthia as MGR instead of US both as
MGR (On the add + remove page they want
any change except the title. We need it
corrected in order to open Business account

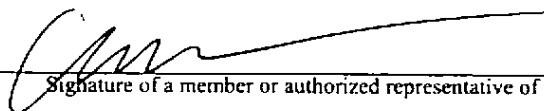
E. Effective date, if other than the date of filing: _____ **(optional)**

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated 7/9/21


Signature of a member or authorized representative of a member

Cynthia Cesar

Typed or printed name of signee