## L21000402521

| (Requestor's Name)        |                   |             |
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| (Add                      | dress)            |             |
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| (City                     | y/State/Zip/Phone | e #)        |
| PICK-UP                   | ☐ WAIT            | MAIL        |
| (Bu                       | siness Entity Nan | ne)         |
| (Do                       | cument Number)    | <del></del> |
| Certified Copies          | _ Certificates    | of Status   |
| Special Instructions to I | Filing Officer:   |             |
|                           |                   |             |
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## **COVER LETTER**

| то:          | Registration Se<br>Division of Cor |   |  |  |
|--------------|------------------------------------|---|--|--|
| čana i       |                                    | NTING LLC                                       |  |  |
| 803          | F.C.1:                             | Name of Lan                                     | nted Liability Company   | ··   |
| l'he er      | nclosed Articles of                | Amendment and fee(s) are sub                    | emitted for filing.  |  |
| Please       | return all correspo                | ndence concerning this matter                   | to the following:  |  |
|              |                                    | ROBERTO P PENARAN                               |  |  |
|              |                                    |   | Name of Person   |  |
|              |                                    | A & II PAINTING ELC                             |  |  |
|              |                                    |   | Firm Company   |  |
|              |                                    | 6230 SANTA LUCINA                               |  |  |
|              |                                    |   | Address  |  |
|              |                                    | WEST PALM BEACH FL                              |  |  |
|              |                                    |   | City/State and Zip Code  | <del></del>  |
|              |                                    | N_SOSA@BELLSOUTH1                               |  |  |
|              |                                    | E-mail address: (                               | to be used for future annual report notif                                  | ication)   |
| For fu       | rther information e                | oncerning this matter, please o                 | all:   |  |
| ROBE         | ERTO P PENARA:                     | · ·   | 561 370-4794<br>at () Daytime  |  |
|              | Name o                             | f Person  | Area Code Daytime  | : Telephone Number   |
| Enclos       | sed is a check for th              | ne following amount:                            |  |  |
| <b>€</b> \$2 | 25.00 Filing Fee                   | ☐ \$30.00 Filing Fee &<br>Certificate of Status | [] \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | U \$60.00 Filing Fee. Certificate of Status & Certified Copy radditional 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 PUBLICATION 13:03

A & H PAINTING LLC

| (A Florida Limited I  | Liability Company)        | our records.)          |                         |
|---|---------------------------|------------------------|-------------------------|
| The Articles of Organization for this Limited Liability Company Florida document number $\frac{1.24000402521}{1.000402521}$ .   | were filed on             | 021                    | and assigned            |
| This amendment is submitted to amend the following:   |                           |                        |                         |
| A. If amending name, enter the new name of the limited liab   | ility company here:       |                        |                         |
| N/A   |                           |                        |                         |
| The new name must be distinguishable and contain the words "Lumited Liabil  | lity Company," the design | ation "LLC" or the abl | previation "L.L.C."     |
| Enter new principal offices address, if applicable:   | N/A                       |                        |                         |
| (Principal office address MUST BE A STREET ADDRESS)   |                           |                        |                         |
|   |                           |                        |                         |
| Enter new mailing address, if applicable:   | N/A                       |                        |                         |
| (Mailing address MAY BE A POST OFFICE BOX)  |                           |                        |                         |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:                |                           |                        | e of the new registered |
|   | Enter Florida si          |                        |                         |
|   | City                      | , Florida              | Zip Code                |
| None Donistanus Assort's Cinemature of Shanning Donistanus Assorts  | City                      |                        | zip Code                |
| New Registered Agent's Signature, if changing Registered Agent:<br>I hereby accept the appointment as registered agent and agre<br>provisions of all statutes relative to the proper and complete | ee to act in this capa    |                        |                         |

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>     | Address 80.1.2. 27 All 7: 03 | Type of Action |
|----------------------|-----------------|------------------------------|----------------|
| MGR                  | MARIA D PENARAN | 6230 SANTA LUCINA            |                |
|                      |                 | WEST PALM BEACH FL 33415     | ≣Remove        |
|                      |                 |                              | = Change       |
| AMBR MARIA D PENARAN | MARIA D PENARAN | 6230 SANTA LUCINA            | <b>=</b> Add   |
|                      |                 | WEST PALM BEACH FL 33415     | □Remove        |
|                      |                 |                              | □Change        |
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| Effective date, if other than the date of file  | ling: (optional)  |
| If an effective date is listed, the date must be specific;  Note: If the date inserted in this block does no document's effective date on the Department of | ling: (optional) and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) of meet the applicable statutory filing requirements, this date will not be listed as the of State's records. |
| e record specifies a delayed effective date, but red is filed.  | not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the  |
| Dated   | 2021  |
| Roberto   | O Robean Ta member or authorized representative of a member   |
| .argaanne oi  | i a memore of auditorized representative of a memori  |
| ROBERTO P PENARAN   |   |
|   | Typed or printed name of signee   |

Filing Fee: \$25.00