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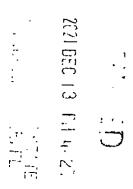
| (Requestor's Name)                      |        |
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| PICK-UP WAIT                            | MAIL   |
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| Certified Copies Certificates of        | Status |
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| Special Instructions to Filing Officer: |        |
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Office Use Only



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A. BUTLER DEC 27 2021.

## **COVER LETTER**

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

| subject: <u>Aff</u> o          | rdable Painting<br>Name of Lind              | and Restoration l   | LLC.   |
|--------------------------------|--|---|--|
| The enclosed Articles of A     | Amendment and fee(s) are sub-                | mitted for filing.  |  |
| Please return all correspor    | ndence concerning this matter                | to the following:   |  |
|                                | Jeremy                                       | Whitson<br>Name of Person   |  |
|                                | Affordable Pa                                | inting and Restorat   | ion LLC.   |
|                                | 2566 Ham Bl                                  | Address   |  |
|                                | Clearwater, Fl                               | City/State and Zip Code  83@ amr. 1. com to be used for future annual report noti | ·  |
|                                | jeremywhit so<br>Etmail address: (1          | n 83@ amr. 1. com   | fication)  |
| For further information co     | oncerning this matter, please ca             | all:  |  |
| Jeremy Wh                      | Person                                       | at (727) 851-<br>Area Code Daytim   | 3065<br>e Telephone Number   |
| Enclosed is a check for th     | e following amount:                          |   |  |
| □ \$25.00 Filing Fee           | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)               | Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address Registration S | ection                                       | <u>Street Address:</u><br>Registration Se   |  |
| Division of Co<br>P.O. Box 632 | •  | Division of Cor<br>The Centre of T  | •  |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Affordable Printing and R   | lesteration 2010EC 13 PM 1.2   |
|---|--|
| (Name of the Limited Liability Compan<br>(A Florida Limited L   | y as it now appears on our records.)   |
|   | The state of the s |
| The Articles of Organization for this Limited Liability Company v   | were filed on 9/29/2021 FL and assigned  |
| Florida document number <u>L21000427807</u>   |  |
| This amendment is submitted to amend the following:   |  |
| A. If amending name, enter the new name of the limited liabil   | lity company here:   |
| The new name must be distinguishable and contain the words "Limited Liabili   |  |
| The new name must be distinguishable and contain the words "Limited Liabili   | ty 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)   |  |
|   |  |
| 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: | ddress on our records, enter the name of the new registere   |
|   |  |

## New Registered Agent's Signature, if changing Registered Agent:

Name of New Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being addedor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

| Title | <u>Name</u>    | Address              | Type of Action |
|-------|----------------|----------------------|----------------|
| MGR   | Jeremy Whitson | 2566 Harn Blul #16   | EXdd           |
|       |                | Clearwater, Fl 33764 | □Remove        |
|       |                |                      | □Change        |
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| effective d<br>e: If the o | te, if other than the date of filing: December 9, 2021 (optional) late is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant date inserted in this block does not meet the applicable statutory filing requirements, this date will not liffective date on the Department of State's records. | to 605.0<br>be liste |
| cord speci<br>i filed.     | ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th da   | iy after             |
|                            | 2/9/2021 9:00 m.  |                      |
| ed                         |   |                      |

Filing Fee: \$25.00