

# L 22000 143928

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

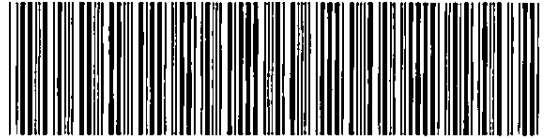
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
TALLAHASSEE, FLORIDA

2024 JUN 24 AM 8:54

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# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** A M Y PAINTING FL 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:

ALEYDA I HERNANDEZ ALMENDAREZ  
Name of Person  
A M Y PAINTING FL LLC  
Firm/Company  
7949 3RD STREET  
Address  
PANAMA CITY BEACH FL 32413  
City/State and Zip Code  
lanotariahispana@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ALEYDA HERNANDEZ at 850 9195750  
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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 21, 2024

ALEYDA I HERNANDEZ ALMENDAREZ  
7949 3RD STREET  
PANAMA CITY BEACH, FL 32413

SUBJECT: A M Y PAINTING FL LLC  
Ref. Number: L22000143928

We have received your document for A M Y PAINTING FL LLC and your check(s) totaling \$40.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Managers Name that is being removed must be listed how it appears on DOS records.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 524A00013564

RECEIVED  
2024 JUN 24 AM 10:18  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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

**FILED**

A M Y PAINTING FL LLC

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

2024 JUN 24 AM 8: 54

TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 03/24/2022 and assigned Florida document number L22000143928.

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:**

7949 3RD STREET

**(Principal office address MUST BE A STREET ADDRESS)**

PANAMA CITY BEACH FL 32413

**Enter new mailing address, if applicable:**

7949 3RD STREET

**(Mailing address MAY BE A POST OFFICE BOX)**

PANAMA CITY BEACH FL 32413

**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	Hernandez Almendarez, Aleyda Iveth	7949 3RD STREET	<input type="checkbox"/> Add
		PANAMA CITY BEACH FL 32413	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Hernandez Almendarez, Aleyda Iveth	7949 3RD STREET	<input checked="" type="checkbox"/> Add
		PANAMA CITY BEACH FL 32413	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

I ALEYDA IVETH HERNANDEZ ALMENDAREZ NEED TO CHANGE MY TITLE AS AN AUTHORIZED  
PERSON OF MY COMPANY. THE CHANGE IS FROM MGR TO AMBR.

FILED  
2024 JUN 24 AM 8:54  
TALLAHASSEE, FLORIDA

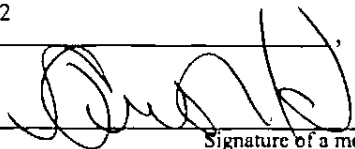
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(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 JUNE 12, 2024

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

ALEYDA IVETH HERNANDEZ ALMENDAREZ  
\_\_\_\_\_  
Typed or printed name of signee