L22000159410

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(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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Special Instructions to	Filing Officer:	
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22 MAY 12 PM 3: 16

T. MATTHEWS

JUL 11 2022

COVER LETTER

TO: Registrati Division o	on Section f Corporations		
USA SUBJECT:	PAINTING & RENOVATIONS L	ıc	·
	Name of I.	imited Liability Company	
The enclosed Articl	es of Amendment and fee(s) are so	bmitted for filing.	
Please return all cor	respondence concerning this matte	er to the following:	
	Marly Magalhaes		
		Name of Person	
	Vitrine Corp		
		Firm/Company	
	830 NW156 Ave		
	······································	Address	
	Pembroke Plnes, FL 3302	28	
	marty.imagalhaes@gmail.		
For further informati	E-mail address: on concerning this matter, please o	(to be used for future annual report noti	fication)
Marly Magalhaes	on some of the state of	954 673-1974	
Na	me of Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check f	or the following amount:		
■ \$25.00 Filing Fe		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Ado</u> Registration of		Street Address: Registration Sec	
P.O. Box (Division of Corp The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ONVISION OF CORPORATIONS ARTICLES OF ORGANIZATION OF 22 MAY 12 PM 3: 16

USA PAINTING & RENOVATIONS LLC	
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number £22000159410	Company were filed on 04/01/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limi	ited liability company here:
N/A	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDR	(ESS)
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 agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
Name of New Registered Agent: N/A	
New Registered Office Address:	
	Enter Florida street address
	Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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>	Name	<u>Address</u>	Type of Action
MGR	Josselin X. Perla de Ordonez	2719 NE 32ND AVE. APT. 6.	≣ Ad d
		FT. LAUDERDALE, FL 33308	
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			CAdd
		⊡Remove	
		□Change	
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			Change
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			CCharacter

N/A	
 	
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fective date, if other than the	e date of filing: (optional)
an effective date is listed, the date mu ote: If the date inserted in this b	ust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 block does not meet the applicable statutory filing requirements, this date will not be listed as
ocument's effective date on the D	
record specifies a delayed effecti-	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
is filed.	· · · · · · · · · · · · · · · · · · ·
April, 29	2022'
	/ / 3
	Signature of a member or authorized representative of a member
MARLY MAGALHAF	

Filing Fee: \$25.00