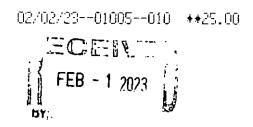
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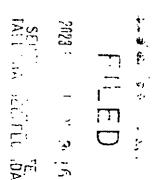
(Requestor's Name)
(Address)
,
(Address)
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☐ PICK-UP ☐ WAIT ☐ MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
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Special management to timing ember.

Office Use Only



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COVER LETTER

Registration Section

Division of Corporations

TO:

FLO PRO	FESSIONAL COATINGS L.L.	.C.	,
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	RENE TORRES		
		Name of Person	
	RETOVA HOLDINGS		
	-	Firm/Company	
	2219 Harper	Street	
	·	Address	7023 SF 1A1
	Tampa, FL	33605	
		City/State and Zip Code	
	RetovaLLC@gmail.com		
	E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all:	10 m
JEN HENSLEY		941 755-8583 at ()	12
Name o	f Person		: Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	So0.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration 9 Division of C P.O. Box 632 Tallahassee, 1	Section 'orporations '7	Street Address: Registration Sec Division of Con The Centre of To 2415 N. Monroe Tallahassee, FL	oorations allahassee : Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FLO PROFESSIONAL COATINGS L.L.C.

(Name of the Limit	(A Florida Limited	Liability Company)	
The Articles of Organization for this Limited Li Horida document number 1.22000199693	iability Company	were filed on 4/27/2022	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liab	pility company here:	
he new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Inter new principal offices address, if applic Principal office address MUST BE A STREE		2219 Harper St Jampa, FL 336	05
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>	Hensky Law Of- 5190 76th St. Bradenton, FL	Hices W. STE D 34207
3. If amending the registered agent and/or r gent and/or the new registered office addres		address on our records, <u>enter th</u>	e name of the new registered
Name of New Registered Agent:	JEN J. HENSL	EY	-
New Registered Office Address:	5190 26TH ST	W STE D Enter Florida street address	
	BRADENTON		34207 -

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 am indin. 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	Address	Type of Action
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			AS Change
			Add
			Add Remove
			Dichange
			□Remove
			□Change
			□Add
			□Remove
			□Change

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Signature of a member or authorized representative of a member	is filed.			·	2023								1
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