

L22000233485

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

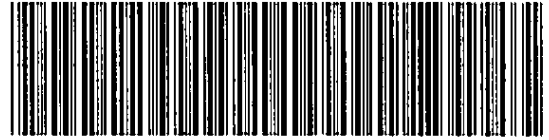
(Document Number)

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J. HORNE
SEP 13 2022

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06/22/22--01025--003 **30.00

FILED
2022 JUN 22 PM 1:19
SECRETARY OF STATE
TALLAHASSEE, FL

INTERNAL REVENUE SERVICE

CINCINNATI OH, 45999-0023

Subject: Change EIN BUSINESS NAME

To whom this letter concern:

I Felipe Estrada one of the partners of the Business Glory Walls LLC, would like to change the name of the business Glory Walls with EIN 88-2374198 that was filed electronically on May 5/2022 with address 1658 SE Lorraine St Port St Lucie, FL 34952.

After registered the business, we change our mind with the name, the new name should be True Bright Painting LLC, and the date of registered should remain the same.

Enclosed the amendment with the state of Florida with the changes requested.

Sincerely

Felipe Estrada

A handwritten signature in black ink that reads "Felipe Estrada". The script is cursive and fluid, with the first name "Felipe" and last name "Estrada" clearly distinguishable.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLORY WALLS 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:

OLGA ESTRADA

Name of Person

GLORY WALLS LLC

Firm/Company

1658 SE LORRAINE ST

Address

PORT SAINT LUCIE, FL 34952

City/State and Zip Code

olgaestrada16@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OLGA ESTRADA

772

5212107

at (_____) _____

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

FILED
2022 JUN 22 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FL
and assigned

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

If Changing Registered Agent, Signature of New Registered Agent

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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)

Dated _____, _____.

Typed or printed name of signee