L22000340856

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COVER LETTER

Registration Section
Division of Corporations

TO:

cunicer.	JR NEW INN	OVATION PAINTING LLC		
SUBJECT:	Name of Lin	nited Liability Company		
	Amendment and fee(s) are sub	-		
Please return all correspor	dence concerning this matter	to the following:		
		JOHNNY RODRIGUEZ		
		Name of Person		
		Firm/Company		
	30	030 EAGLE CROSSING DR		
		Address		
		KISSIMMEE, FL 34746		
		City/State and Zip Code		
		myrodriguez0896@gmail.com to be used for future annual report	notification)	. 1
For further information co	ncerning this matter, please c	·	ikimeanon)	• ;
JOHNNY R	ODRIGUEZ	34746 at ()	(321) 440-1390	· -· · · :
Name of	Person	Area Code Da	ytime 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 \$t Certified Copy (additional copy is e	atus &
Mailing Address: Registration So Division of Co P.O. Box 6327 Tallahassee, Fl	ection rporations	The Centre of		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JR NEW INNOVATION I	PAINTING LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number L22000340856	were filed on	08/02/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the des	ignation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		v / /	
(Principal office address MUST BE A STREET ADDRESS)		V/a	
		*/M	-
			;
Enter new mailing address, if applicable:		,	١-١
• • • • • • • • • • • • • • • • • • • •		1//1	
Mailing address MAY BE A POST OFFICE BOX)		\sqrt{A}	
			
B. If amending the registered agent and/or registered office a	address on our rec	ords, enter the nam	
ngent and/or the new registered office address here:		<u> </u>	
	,		
Name of New Registered Agent:	$-\Lambda I/I$		
Naw Pagistarad Office Address	/V/H	•	·
New Registered Office Address:	Enter Florid	a 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 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>	Address	Type of Action
AMBR	MARIANNI T ESCALONA	3030 EAGLE CROSSING DR, KISSIMMI	EE FL 3474₁
			■Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			☐ Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

If amending any other information, enter change(s) here: (Auto-	
	
	_
	
Effective date, if other than the date of filing:	(optional)
Note: If the date inserted in this block does not meet the applicable state	filing or more than 90 days after filing.) Pursuant to 605.0207 utory filing requirements, this date will not be listed as
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12	utory filing requirements, this date will not be listed as
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12 rd is filed.	entory filing requirements, this date will not be listed as a second control of the seco
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12 rd is filed. Dated August 10 2023	entory filing requirements, this date will not be listed as a control of the second cont
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12 rd is filed.	entory filing requirements, this date will not be listed as a control of the second cont

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