L22000385132

(Re	questor's Name)	
(Ad	dress)	<u>_</u>
bA)	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		

Office Use Only

A. RIVERS
DEC 2 1 2022



900395010609

10,03/22--01010--028 **25.00



COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

LINE IT UI SUBJECT:	P STRIPING LLC		
30b0ECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	endence concerning this matter	to the following:	
	Michael Jenkins		
		Name of Person	
	Line It Up Striping LLC		
		Firm/Company	
	207 SE Oat Pl		
	·	Address	
	Lake City, FL 32025		
		City/State and Zip Code	
	michaelchristianjenkins@ya		
	E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c	ali:	
Michael Jenkins		386 8670558	
Name o	f Person	Area Code Daytii	ne Telephone Number
Enclosed is a check for the	he 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		Street Address:	antion.
Registration 5 Division of C		Registration So Division of Co	
P.O. Box 632		The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	(A Florida Limited Liabili	t now appears on our records.) y Company)	
he Articles of Organization for this Limited I lorida document number H22000307825	Liability Company were	filed on September 7, 2022	and assigned
his amendment is submitted to amend the fol	llowing:		
. If amending name, enter the new name	of the limited liability	company here:	
ne new name must be distinguishable and contain the	words "Limited Liability Co	mpany," the designation "LLC" or th	e abbreviation "L.L.C."
nter new principal offices address, if appli	icable:		
Principal office address MUST BE A STRE	ET ADDRESS)	·····	
nter new mailing address, if applicable:			
failing address MAY BE A POST OFFICE	<u> </u>	×4.	
If umanding the registered upont and/or	registered office addr	es on our records, enter the n	ame of the new regis
6 0	~,	ess on our records, enter the n	
6 6	ess here:	ess on our records, <u>enter the n</u>	
6 0 0	~,	ess on our records, <u>enter the n</u>	2022 OCT
ent and/or the new registered office addr	ess here:		7022 OCT 3
	ess here: Michael Jenkins	ess on our records, enter the n Enter Florida street address , Florida	7022.0CT3 PH

New Registered Agent's Signature, if changing Registered Agent:

LINE IT UP STRIPING LLC

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>	Type of Action
MGR	Michael Jenkins	207 SE Oat Pl	🖺 Add
		Lake City, FL 32025	□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
		·	□Remove
			□Change

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Filing Fee: \$25.00