L22000413775

| (R | equestor's Name) |
|-------------------------|------------------------|
| (A | ddress) |
| (A | ddress) |
| (C | ity/State/Zip/Phone #) |
| ☐ PICK-UP | WAIT MAIL |
| (B | usiness Entity Name) |
| (D | ocument Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to | o Filing Officer; |
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| | Office Use Only |



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TO:

Registration Section
Division of Corporations

| SUBJECT: | Name of Limi | ited Liability Company | |
|--|--|---|---|
| The enclosed Articles of | Amendment and fee(s) are sub- | mitted for filing. | |
| | ndence concerning this matter | | |
| | Michel Tahan | | |
| | | Name of Person | |
| | MT PAINTING & RESTO | DRATION LLC | |
| | | Firm/Company | |
| | 8250 LAKEWOOD RANG | CH BLVD APT 112 | |
| | | Address | |
| | LAKEWOOD RANCH, F | L 34202 | |
| | | City/State and Zip Code | · |
| | micheltahan@yahoo.com | | |
| | E-mail address: (| to be used for future annual report notifi | cation) |
| For further information c | oncerning this matter, please ca | all: | |
| Michel Tahan | | 703 888-8938 | |
| Name o | f Person | at () Area Code Daytime | Telephone Number |
| Enclosed is a check for the | ne following amount: | | |
| □ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, | Section Corporations 27 | Street Address: Registration Sec Division of Corp The Centre of Tallahassee, FL | oorations allahassee : Street, Suite 810 |

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

FILED

| MT PAINTING & RESTORATIO | ON LLC | 2022 NOV -2 AM 8: 21 | |
|--|---|--|--|
| (Name of the Limi | ited Liability Company as it now appears (A Florida Limited Liability Company) | on our records.) | |
| The Articles of Organization for this Limited L | iability Company were filed on 09/2 | 1/22 OF STATE SSTEEL STATE and assigned | |
| lorida document number L22000413775 | | | |
| his amendment is submitted to amend the fol | lowing: | | |
| A. If amending name, enter the new name of | of the limited liability company her | <u>e</u> : | |
| he new name must be distinguishable and contain the | words "Limited Liability Company," the des | ignation "L.L.C." or the abbreviation "L.L.C." | |
| Enter new principal offices address, if appli | cable: | | |
| Principal office address MUST BE A STREI | ET ADDRESS) | | |
| | | | |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE | | | |
| 3. If amending the registered agent and/or gent and/or the new registered office addre | | ords, enter the name of the new registe | |
| Name of New Registered Agent: | Michel Tahan | | |
| New Registered Office Address: | 8250 LAKEWOOD RANCH BLVI | D APT 112 | |
| new negistered office radiess. | Enter Florida street address | | |
| | LAKEWOOD RANCH | Florida 34202 | |
| | Ciry | Zip Code | |
| New Registered Agent's Signature, if changing | Registered Agent: | | |
| hereby accept the appointment as register provisions of all statutes relative to the propincept the obligations of my position as regioning filed to merely reflect a change in the company has been notified in writing of this | per and complete performance of n istered agent as provided for in Ch registered office address, I hereby | ny duties, and I am familiar with and napter 605, F.S. Or, if this document is | |

-82C1CF69CD9141B... If Changing Registered Agent, Signature of New Registered Agent ocuSign Envelope ID: CB5E3A64-74C2-4C87-ABCF-AB08A38DD2E1
11 amenuing Authorized rerson(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 |
|--------------|--------------|----------------------------------|----------------|
| MGR | Michel Tahan | 8250 LAKEWOOD RANCH BLVD APT 112 | ∃ Add |
| | | LAKEWOOD RANCH, FL, 34202 | □Remove |
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|---|-------------------------------|-----------------------------------|---|
| October 28 | 2022 | | |
| f the record specifies a delayed effecti ecord is filed. | ve date, but not an effective | time, at 12:01 a.m. on the e | arlier of: (b) The 90th day after the |
| Note: If the date inserted in this b document's effective date on the I | block does not meet the appl | icable statutory filing requit | ements, this date will not be listed as |
| E. Effective date, if other than the | e date of filing: | or to date of filing or more than | (optional) 90 days after filing.) Pursuant to 605.0207 |
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Typed or printed name of signee