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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	<u></u>
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ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION

DANY'S PAINTING AND REMO				
(<u>Name of the Lim</u>	(A Florida Limited)	ny as it now appears on a Liability Company)	our records.)	
The Articles of Organization for this Limited I	Liability Company	were filed on 11/17/2	022	and assigned
Florida document number 1.22000492360				
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name	of the limited liab	ility company here:		
N/A				
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company." the design	ation "LLC" or the ab	oreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A		
(Principal office address MUST BE A STRE	ET ADDRESS)			-
Pater and mailing address if analisable		N/A		Ξ
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				<u></u>
		-	·	
B. If amending the registered agent and/or agent and/or the new registered office addr Name of New Registered Agent:		address on our recor	ds, <u>enter the nam</u>	e of the new regis
	N/A			
New Registered Office Address:	1864	Enter Florida si	treet address	
			m · ·	
			, Florida	

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 Gur records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	LAZARO BLANCO BARRIZONTE	426 CACTUS CIR LEHIGH ACRES FL 33936	= Add
			□Remove
			□Change
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ctive date, if other than the date of filing: 10/20/2023	(optional)
effective date is listed, the date must be specific and cannot be prior to date of filing et. If the date inserted in this block does not meet the applicable statutory iment's effective date on the Department of State's records.	gor more than 90 days after filing.) Pursuant to 605.0 filing requirements, this date will not be listed
ord specifies a delayed effective date, but not an effective time, at 12:01 a filed.	a.m. on the earlier of: (b) The 90th day after
ed OCTOBER 20	
Sh	

Filing Fee: \$25.00

Typed or printed name of signee