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TALLAHASSEE, FL

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R. HUNT

03/31/23

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jorjai's Painting 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:

Micaela Quich Quiche

\_\_\_\_\_  
Name of Person

Jorjai's Painting LLC

\_\_\_\_\_  
Firm/Company

824 Denton Blvd NW

\_\_\_\_\_  
Address

Ft Walton Beach, FL 32547

\_\_\_\_\_  
City/State and Zip Code

valequich@gmail.com

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

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TALLAHASSEE, FL  
DIVISION OF STATE

For further information concerning this matter, please call:

Micaela Quich Quiche

850 496-2504

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

**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>            | <u>Type of Action</u>                      |
|--------------|---------------------------|---------------------------|--------------------------------------------|
| AMBR         | Jose Luis Alvarado Xiloj  | 824 Denton Blvd NW        | <input type="checkbox"/> Add               |
|              |                           | Ft Walton Beach, FL 32547 | <input checked="" type="checkbox"/> Remove |
|              |                           |                           | <input type="checkbox"/> Change            |
| AMBR         | Jorge Luis Alvarado Xiloj | 824 Denton Blvd NW        | <input checked="" type="checkbox"/> Add    |
|              |                           | Ft Walton Beach, FL 32547 | <input type="checkbox"/> Remove            |
|              |                           |                           | <input type="checkbox"/> Change            |
|              |                           |                           | <input type="checkbox"/> Add               |
|              |                           |                           | <input type="checkbox"/> Remove            |
|              |                           |                           | <input type="checkbox"/> Change            |
|              |                           |                           | <input type="checkbox"/> Add               |
|              |                           |                           | <input type="checkbox"/> Remove            |
|              |                           |                           | <input type="checkbox"/> Change            |
|              |                           |                           | <input type="checkbox"/> Add               |
|              |                           |                           | <input type="checkbox"/> Remove            |
|              |                           |                           | <input type="checkbox"/> Change            |

2009-03-01 PM 3:50  
 MAY DE STATE  
 HALL COUNTY, FL

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

We typed Jose Luis Alvarado Xiloj, this was a typo. The name of the AMBR is Jorge Luis Alvarado Xiloj.

We are simply changing the first name.

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TALLAHASSEE, FL

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

(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)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated March 27, 2023

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Micaela Quich Quiche

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee: \$25.00**