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COVER LETTER

TO: Registration Division of C			
SUDJECT.	RICHARD KII	NG PAINTING LLC.	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sul	bmitted for filing.	
Please return all corres	spondence concerning this matter	to the following.	
		RICHARD KING	
		Name of Person	
		RICHARD KING PAINTING	
		Firm/Company	
	1	317 LAKE AVENUE	
		Address	
	TAI	LLAHASSEE, FLORIDA 32310-51	738
		City/State and Zip Code	
	F-mail address:	kkingrick@mail.com (to be used for future annual report noti	itication)
For further information	n concerning this matter, please c	· ·	cuinar,
STEPHAN	IE KING	850 329-7974	
Name	e of Person	at ()	ne Telephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filmg 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

Street Address:
Registration Section
Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization for this Limited Liability Company were filed on _____JUNE 20,2024 and assigned Florida document number, L23000296609 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: RICHARD KING Name of New Registered Agent: 1317 LAKE AVENUE New Registered Office Address:

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.

TALLAHASSEE,

D 1 17 6 4 40

Enter Florida street address

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
			□Remove
			Change
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cord specifies a s filed.	delayed effective date, b	out not an effective	time, at 12:01 a i	n, on the earlier of:	(b) The 90th day at	ter the
ed	JUNE. 20	2024	·			
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