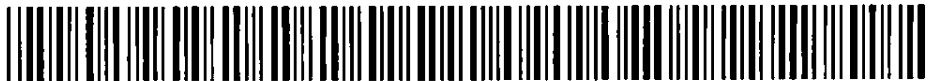


L23000418143

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000405292 3)))



H240004052923ABC

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : SA FINANCE & ACCOUNTING INC.
Account Number : I20190000111
Phone : (407)800-7028
Fax Number : (407)992-9407

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BRONCO COATINGS LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

2024 DEC -9 PM 2:13

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Corporate Filing Menu

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JAN 09 2025

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BRONCO COATINGS 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:

Maria C Sousa Neiva
Name of Person
SA Finance & Accounting Inc
Firm/Company
5728 Major Blvd Ste 307
Address
Orlando Florida 32819
City/State and Zip Code
Licenses@safinacc.com
E-mail address: (to be used for future annual report notification)

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RECEIVED

For further information concerning this matter, please call:

Maria C Sousa at (407) 8007028
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

■

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

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

BRONCO COATINGS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed 09/07/2023 and assigned
on Florida document number L23000418143

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 "L.L.C."

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:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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.

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>
<u>AMBR</u>	<u>MARTINS, SAMIR F</u>	<u>5600 CARDER RD</u>	<input type="checkbox"/> Add
		<u>ORLANDO, FL 32810</u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u>AMBR</u>	<u>PINHEIRO CARVALHO, RENATA</u>	<u>5600 CARDER RD</u>	<input type="checkbox"/> Add
		<u>ORLANDO, FL 32810</u>	<input checked="" type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change
<u></u>	<u></u>	<u></u>	<input type="checkbox"/> Add
		<u></u>	<input type="checkbox"/> Remove
		<u></u>	<input type="checkbox"/> Change

[illegible]

(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)

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

Lucas Aguiar
Dec-06 2024 11:35:19 AM

LUCAS GIOVANNI AGUIAR
Typed or printed name of signee