

L2300 512147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

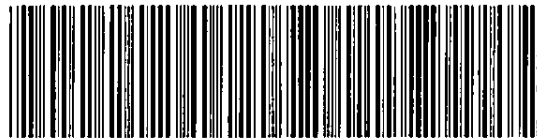
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400436457344

09/13/24 09:13 AM 8:13

RECEIVED  
CLERK OF STATE  
TALLAHASSEE, FL  
09/13/24 AM 8:13

R. HUNT

09/13/24

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: OSCAR PAINTING & REMODELING 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:

DESTER RODRIGUEZ PEREZ  
Name of Person

OSCAR PAINTING & REMODELING LLC  
Firm/Company

1226 SW 3 AVE  
Address

CAPE CORAL, FLORIDA, 33991  
City/State and Zip Code

desterrodriguez385@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

OSCAR RODRIGUEZ PEREZ at 239 666-5193  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |   |
|--|--|--|---|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input checked="" type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

OSCAR PAINTING & REMODELING 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 on 11/13/2023 and assigned  
Florida document number L23000512147

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

OSCAR & ORGE MULTI SERVICES LLC

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)

1226 SW 3rd Ave  
LAPE CORAL FL 33991

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1226 SW 3rd Ave  
LAPE CORAL, FL, 33991

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:

1226 SW 3rd Ave  
Enter Florida street address  
LAPE CORAL Florida 33991  
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>
AMBR	ORDELINA CABALLERO ARIAS.	1226 SW 3 <sup>rd</sup> Ave Cape Coral, FL 33991	<input checked="" 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
			<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

DEPT. OF STATE  
TALLAHASSEE, FL

SEP 11 2013  
AM 9:13

7/13 AM 8:13  
FL DEPT OF STATE  
TAMPA, FL

13 AM 8:13  
STATE  
MASS., FL

**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.

Dated September 8th, 2024.

OSCAR RODRIGUEZ PEREZ

**Filing Fee: \$25.00**