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PICK-UP	☐ WAIT	MAIL
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2024 JAN -4 PM 6: 08

## **COVER LETTER**

TO:	Registration Sec Division of Corp			
SUBJE	:ct: <u>TONYS N</u>		& CERAMIC COATING, LL mited Liability Company	_C
The end	closed Articles of A	kmendment and fee(s) are su	bmitted for filing.	
Please	return all correspon	dence concerning this matte	r to the following:	
		Corpo	rate Maintenance Lo	ead
			Name of Person	
	Processing Department			t
	Firm: Company			
	1450 Vassar St			
			Address	
	Reno, NV 89502			
			City/State and Zip Code	
		E-mail address:	(to be used for future annual report no	tification)
For furt	her information co	ncerning this matter, please o	•	
	Procession	na Denartment	900 629 2220	n
Processing Department Name of Person		me Telephone Number		
Enclose	d is a check for the	following amount:		
<b>☑ \$</b> 25	.00 Filing Fee	☐ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	\$60.00 Filing Fee.

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Certificate of Status

STREET/COURIER ADDRESS:

Certificate of Status &

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Cliffon Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ompany as it now appears on our nited Liability Company)  pany were filed on 12/01/2		-
nany were filed on 12/01/2	_	
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liability company here:		
MIC COATINGS, LLC		
Liability Company," the designation	n "LLC" or the abbreviation "	L.L.C."
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d office address on our r	ecords, enter the name	of the nev
here:		
Enter Florida street	address	
	. Florida	
<u>N</u> 1	d office address on our rehere:	MIC COATINGS, LLC  Liability Company," the designation "LLC" or the abbreviation "  2024 JAN 1 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

## 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

Title	Name	Address	Type of Action
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		<del></del>	☐ Remove
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D. If amending any other information, enter change(s) here: (Attach	additional sheets, if necessary.)
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E. Effective date, if other than the date of filing: N/A	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filir Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	ng or more than 90 days after filing.) Pursuant to 605.0207 (3)(6
If the record specifies a delayed effective date, but not an effectible.	tive time, at 12:01 a.m. on the earlier of:
Dated December 28 . 2023	
Dated De Cember 28 . 2023  Tend Joshum  Signature of a member or authorized representations.	ntative of a member
and the property of the proper	
Tony Lockley	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00