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10:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : INCFILE.COM LLC Account Number: I20220000070

Phone (888)462-3453 Fax Number : (877)919-2613

**Enter the email address for this business entity to be used for future

- Email Address: EFILE1234@INCFILE.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 圖茶&E POWER-WASH, PAINT, AND HANDYMAN SERVICES LLC

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M. SOLOMON

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COVER LETTER

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TO: Registration S Division of Co					
	A&E POWER-WASH, PAIN	ST, AND HANDYMAN SERVIC	ES LLC		
SUBJECT:	Name of Limited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are suf-	unitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
	LOVETTE DOBSON				
		Name of Person			
		Firm Company	······································		
	17350 STATE HWY 249	STE 220		202	
		Address		2024 FEB	Ţ,
	HOUSTON, TX 77064			Бі 22 г	
	EFILE1234@INCFILE.CC	City/State and Zip Code		j z ſ	1
	F-mail address:	to be used for future annual report no	otification)		_
For further information	concerning this matter, please c	ali		. 72	
LOVETTE DORSON		1 888462345		_	
Name	of Person	at ()	ime Telephone Number		
Enclosed is a check for	the following amount:				
S25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	[] \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fe Certificate of S Certified Copy cadditional copy is	tatus &	
Mailing Addr Registration Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration S Division of C The Centre of 2415 N. Mon Tallahassee, F	orporations Tallahassee roe Street, Suite 810		

2/21/2024 00:17:48,CST . Page: 3/5

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H24000069206 3)))

A&E POWER-WASH, PAINT, ANI		
(Name of the Limited Liability Compa (A Florida Limited	any ay it now appears on our record: Liability Company)	<u>v)</u>
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000030402</u> .	were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
ANE PAINTING PROS LLC		
The new name must be distinguishable and contain the words "Limited I iabi	lity 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)		202
		רב-
		Ω 2
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		72
Graning address STAT BL AT OST OFFICE BOXY	4-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	PH 2:
		: 2
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new registered
Name of New Registered Agent:		
New Registered Office Address		
	Enter Florida street address	
	, Flo	o rida
-	Cin	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, an provided for in Chapter 605, i	id Lam familiar with and F.S. Or, if this document is
1f Cha	nging Registered Agent, Signature o	f 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		(((H2400069206	
<u>Title</u>	Name	Address	Type of Action
			©Add
			□Remove
			☐ Change
			□Add
			LiRemove
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			©Remove
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			□Remove
			□Change

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		(((1124000003200 3)))
D. If amending any other information, en	ter change(s) here: (Attach additional sheets, if ne	cessary.)
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E. Effective date, if other than the date of (If an effective date is listed, the date must be speci	fic and cannot be prior to date of filing or more than 90 days aft	tional) er filing.) Pursuant to 605,0207 (3)(b)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, th	nis date will not be listed as the
	ut not an effective time, at 12:01 a.m. on the earlier of: ((b) The 90th day after the
record is filed.		
bebruary 20	 2 024	
Dated February 20	····································	
	Church Moszel	
Signature	of a meripher or authorized representative of a member	
	Edward Menzel	
	Typed or printed name of signee	
	Filing Fee: \$25.00	(((1124000069206 3)))