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COVER LETTER

		tion Secti of Corpo							
eum trz		LENTIA F	AINT LLC						
SUBJEC	.l;	Name of Limited Liability Company							
The encl	osed Arti	cles of An	nendment and fee(s) are sub	omitted for filing.					
Please re	turn all c	orrespond	ence concerning this matter	to the following:					
			VALENTINA RANGEL						
				Name of Person					
			VALENTIA PAINT LLC						
				Firm/Company					
			9300 NW 60TH STREET						
				Address					
			TAMARAC FLORIDA 33	3321					
			JACP2002@GMAIL.COM	City/State and Zip C	ode				
		-	~	to be used for future an	nual report notificat	ion)			
For furth	er inform	ation cond	eerning this matter, please c	all:					
VALEN	TINA R	ANGEL		305 at (5138722				
		Name of Pe	rson	Area Code	Daytime Te	lephone Number			
Enclosed	is a chec	k for the t	ollowing amount:						
■ \$25.0	00 Fiting	Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing I Certified Cop (additional copy i	y	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

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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

VALENTIA PAINT LLC		
(<u>Name of the Limited Liability Company as i</u> (A Florida Limited Liability	it now appears on our records.) y Company)	
The Articles of Organization for this Limited Liability Company were Florida document number 124000326535	filed on 07/23/2024 and	d assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability c	company here:	
The new name must be distinguishable and contain the words "Limited Liability Con	mpany," the designation "LLC" or the abbreviation	n "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		<u>.</u>
		<u> </u>
Enter new mailing address, if applicable:		ن
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		2
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	ss on our records, <u>enter the name of the</u>	new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida ity Zip C	ode

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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	VALENTINA CARDONA	9300 NW 60TH STREET	= Add
		TAMARAC FLORIDA 33321	□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

E. Effective date, if other than the date of filing: (It 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)(1) 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.
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.
Dated 08 QF AUGUST 2024 Signature of a member or authorized representative of a member
VALENTINA RANGEL BEJARANO

Filing Fee: \$25.00

Typed or printed name of signee