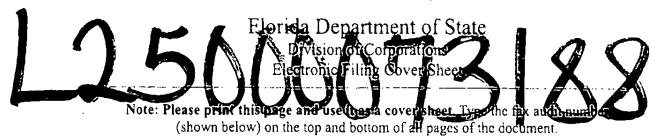
7/2/25, 9:05 AM

Division of Corporations



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LICENSES & PERMITS LLC

Account Number : I20210000155 Phone : (305)226-8727 Fax Number : (786)947-0844

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 SMILEY PAINTS LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

M. SOLOMON

JUL - 7 2025

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Help

COVER LETTER

TO: Registration S Division of Co					
SMILEY I	PAINTS LLC				
SOBJECT:	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.			
Please return all correspond	ondence concerning this matter	to the following:			
	LUCIA ESTRELLA				
		Name of Person			
	LICENSES & PERMITS	LLC			
		Firm/Company			
	8300 W FLAGLER ST				
		Address			~
	MIAMI, FLORIDA 3314	4			במבט יוטר
		City/State and Zip Code			
	LICENSES114@GMAIL.			1	2
	E-mail address:	to be used for future annual report no	tification)		70
For further information of	concerning this matter, please o	all:			PH 4:4
LUCIA ESTRELLA		305 226-8727			+
Name o	f Person		me Telephone Number		
Enclosed is a check for t	he following amount:				
■ 525.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status	
<u>Mailing Addres</u> Registration		Street Address: Registration S	ection		
Division of C		Division of Co			
P.O. Box 632	.7 ·	The Centre of	Tallahassee		
Tallahassee,	FL 32314	2415 N. Monre	oe Street, Suite 8	10	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	. Florid:	a
New Registered Office Address:	Enier Florida street address	
		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:		
agent and/or the new registered office address here	:	
B. If amending the registered agent and/or register	red office address on our records, enter the	name of the new registered
		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		N 5 ***
Enter new mailing address, if applicable:		5 JUL
		20:
(Principal office address MUST BE A STREET ADD	ORESS)	
Enter new principal offices address, if applicable:		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
A. If amending name, enter the new name of the lin	mited liability company here:	
This amendment is submitted to amend the following:		
Florida document number L25000073188		
The Articles of Organization for this Limited Liability	Company were filed on 02/11/2025	and assigned
(A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)	
SMILEY PAINTS LLC		

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>	Address	Type of Action
MGR	DANIEL CABALLERO	7901 4TH ST N	≣ ∆dd
		STE 300	☐ Remove
		ST. PETERSBURG, FL 33702	[]Change
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			□Remove
			□Change
			Add 200 2005 Refinove
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Effective date, if other if an effective date is listed, the Note: If the date inserted document's effective date	in this block does not	meet the appl	licable statutory	or more than 90 day	s, this date will no	nt to 605.020 t be listed a
e record specifies a delaye rd is filed.	d effective date, but n	ot an effective	time, at 12:01 a	m. on the earlier	of: (b) The 90th (iay after the
Dated		2025) -			
		1	thorized represents			_ _
	Signature of	rude uper or an	morizea representi	live of a member		

Filing Fee: \$25.00