that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ARMANDO FERNANDEZ

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 46-0823596 Name and Address of Current Registered Agent:

Current Principal Place of Business:

DOCUMENT# L15000023672

Current Mailing Address: 5308 WINEWOOD DR. SARASOTA. FL 34232 US

5308 WINEWOOD DR. SARASOTA, FL 34232

FERNANDEZ, ARMANDO 5308 WINEWOOD DR. SARASOTA, FL 34232 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ARMANDO FERNANDEZ

Electronic Signature of Registered Agent

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: ARMANDO FERNANDEZ PAINTING SERVICES LLC

Authorized Person(s) Detail :

Title	AMBR
Name	FERNANDEZ, ARMANDO
Address	5308 WINEWOOD DR.
City-State-Zip:	SARASOTA FL 34232

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

03/02/2024 Date

FILED Mar 02, 2024 Secretary of State 2073664796CC

Certificate of Status Desired: Yes

03/02/2024 Date