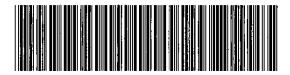
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T. CLINE

EXAMINER (S)



June 2, 2009

STEPHEN PEART 4694 BLUE RIBBON DRIVE MILTON, FL 32583

SUBJECT: STEPHEN PEART HANDYMAN SERVICES, LLC

Ref. Number: L09000006915

We have received your document for STEPHEN PEART HANDYMAN SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following corrections:

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 009A00018480

COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT: Ste	phen Peart Name of Limi	Handyman Services ted Liability Company	LIC.	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspor	ndence concerning this matter	to the following:		
	α			
	Stephen	Pear + Name of Person		
	•	Name of Person		
		Firm/Company	<u> </u>	
	(100) 31	_	1 2	
	4694 Blu	e Ribbon Drive Address	SECF ALL	~ 9
	Millon Flo	\si.\. 32€82	2009 JUN -9 AMII: 01 SECRETARY OF STATE TALLAHASSEE, FLORID	
		City/State and Zip Code	SSEE	The state of the s
	S. Pearte me	chsi. Com to be used for future annual report notificati	on)	العملي المما
For further information co	oncerning this matter, please o		ATE PRIDE	
<i>(</i>) ,	0			
<u>Stephen</u> Name of	YEACT Person	at (<u>850) 450 - 81</u> Area Code & Daytime Te	lephone Number	
Enclosed is a check for the	e following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy	\$60.00 Filing Fee, Certificate of Status &	
Already sent Check	•	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	
Check				
MAII.I	NG ADDRESS:	STREET/COURIER	ADDRESS:	
	ation Section	Registration Section	a mar ar a madifylyly	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stephen Peart Handun	nan Services LLC
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L0900006915</u> .	were filed on Jan. 22 nd 2009 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Paradise Fence & Decks LL	C.
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	4694 Blue Ribbon Frice TI
(Principal office address MUST BE A STREET ADDRESS)	Milton, Florida 32533
Enter new mailing address, if applicable:	4694 Blue Ribbon Dave
(Malling address MAY BE A POST OFFICE BOX)	Milton, Florida 32583" -
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent: New Registered Office Address:	Enter Florida street address, Florida
	City Zip Code

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM =	MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
**************************************			Add Remove		
			Add Remove		
-•·			Add Remove		
			Add Remeve		
			AHAGAAdd SO Remore		
 			OF STAdd		
D. If amer	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessar	(vy.)		
•••••					
Dated		<u>2009</u> .			
	Steph Peart				
	Stephen Penct	r or authorized representative of a member			
	Typed	or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00