# 118000211065

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### **COVER LETTER**

SORTECT: Victoria	LEANOUTS & HANDYMAI		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
•			
,	Processing Departmen	nt	
		Name of Person	
		Firm/Company	
	5605 Digging Court	Suite 200	
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		Address	
	Reno, NV 89502		
		City State and Zip Code	
	docs@incauthority.com		
	E-mail address: ()	to be used for future annual report notifi	ication)
For further information e	oncerning this matter, please ea	ili:	
Processing Departme	ent	arr 800 ) 638-2320	
	f Person		Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2018 NOV -5 AM 10: 17

#### ALPHA CLEANOUTS & HANDYMAN SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records) EURE 1747 OF STATE (A Florida Limited Liability Company) TALLAHASSEE, FL

The Articles of Organization for this Limited Liab Florida document number <u>L18000211065</u>	oility Company were filed on _09/05/20	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designati	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	de:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our	records, <u>enter the name of the new</u>
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida stre	et 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 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>	Name	Address	Type of Action
MGR	Joshua Tackett	3601 Patricia Dr	
		Pensacola, FL 32526	☑ Remove
-			☐ Change
<u> </u>			□ Add
		<del></del>	Remove
			Change
			Remove
			☐ Change
			🗆 Remove
			☐ Change
		□ Add	
			☐ Remove
			☐ Change
			□ Remove
		·	Change

to other information, enter change(s) here: (Attach additional sneets, if necessory)
E. Effective date, if other than the date of filing:  (If 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 ( Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t 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
Devin Cantello
Typed or printed name of signee

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Filing Fee: \$25.00