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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Germina applies				
Special Instructions to Filing Officer:				

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SEP 01 2020 S. YOUNG

COVER LETTER

TO:	Registration Se Division of Cor			
	GB FIXIT	HANDYMAN SERVICES LL	.c	
SUBJE	ECT:	Name of Lin	nited Liability Company	<u> </u>
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		PAULO GOMES		
		<u> </u>	Name of Person	
		GOMES INSURANCE A	ND ACCOUTING	
			Firm/Company	
		240 LOCK ROAD		
			Address	
		DEERFIELD BEACH FL	33442	
			City/State and Zip Code	
		PAULO@GOMESINS.CO		
For fur	ther information c	oncerning this matter, please c	to be used for future annual report no all:	tification)
PAULO	O GOMES		954 531-1451	
	Name o	f Person	at () Area Code Daytir	me Telephone Number
Enclose	ed is a check for th	ne following amount:		
■ \$25	5.00 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		Street Address:	action	
		Registration Se Division of Co		
	P.O. Box 632	7	The Centre of	Tallahassee
	Tallahassee, I	TL 32314	2415 N. Monro	oe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GB FIXIT HANDYMAN SERVICES LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our records.) Liability Company)	,
The Articles of Organization for this Limited Liability Company	were filed on 08/12/2019	and assigned
Florida document number L190002023890		ÚÑ.
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
GB FIXIT REMODELING SERVICES LLC		
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	545 TRACE CIR #110 D2	
Principal office address MUST BE A STREET ADDRESS)	DEERFIELD BEACH FL 33441	
Inter new mailing address, if applicable:	545 TRACE CIR #110 D2	
Mailing address MAY BE A POST OFFICE BOX)	DEERFIELD BEACH FL 33441	
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	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 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
AMBR	GUSTAVO BOECHAT	545 TRACE CIR #110 D2	□ Add
		DEERFIELD BEACH FL 33441	□Remove
			■ Change
MGR	TIFFANY C WAIANTE	545 TRACE CIR #110 D2	
		DEERFIELD BEACH FL 33441	□Remove
			■Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change

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 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. 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 cord is filed.		
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07/15	the record specifies a delayed effective date, but not an effective time, at 12: cord is filed.	01 a.m. on the earlier of: (b) The 90th day after the
Dated	Dated 07/15 2020	
(Dunta of all	(Dunta of 2/1	
Signature of a member of authorized representative of a member	Signature of a member of authorized repre	esentative of a member
GUSTAVO BOECHAT	GUSTAVO BOECHAT	

Filing Fee: \$25.00