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

SIGNATURE: MALIK BROWN OWNER 03/15/202	
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FEI Number: 47-1026601

Name and Address of Current Registered Agent:

BROWN, MALIK T 1900 SE 4TH STREET 38 GAINESVILLE, FL 32641 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:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR	Title	MGR	
Name	BROWN, MALIK T	Name	BROWN, SHAFON	
Address	3022 NE 15TH STREET	Address	3022 NE 15TH STREET	
City-State-Zip:	GAINESVILLE FL 32609	City-State-Zip:	GAINESVILLE FL 32609	

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000155885

Entity Name: MR./ MS. FIX IT HANDYMAN SERVICE LLC

Current Principal Place of Business:

3022 NE 15TH STREET GAINESVILLE, FL 32609

Current Mailing Address:

3022 NE 15TH STREET GAINESVILLE. FL 32609 US

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail



FILED Mar 15, 2021 Secretary of State 6969622462CC

Date