## L09000078465

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11 JUN -3 PM 12: 01

T. HAMPTON

JUN - 9 2011

EXABINETA

## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	The	Handler LLC	
	Name of Lim	ited Liability Company	<del></del>
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matte	r to the following:	
		Yanina Ballesteros	<del> </del>
		Name of Person	
		The Handler LLC	
		Firm/Company	
	34	199 Summerwood Way	
		Address	
		Lakeland, FL 33812	
		City/State and Zip Code	
	h	nandler007@live.com	
•	E-mail address: (	to be used for future annual report	notification)
For further information	concerning this matter, please	call:	
N	/lichael Brox	at ( 786 )	266 8384
Name	of Person		aytime Telephone Number
Enclosed is a check for	the following amount:		
▼ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section		Registration S	
P.O. E	on of Corporations Box 6327 assee, FL 32314	Division of Co Clifton Buildin 2661 Executiv Tallahassee, F	ng e Center Circle

1.

## ARTICLES OF AMENDMENT

## ARTICLES OF ORGANIZATION OF CORPORATIONS

**OF** 

11 JUN -3 PM 12: 01

-FILEU SECRETARY OF STATE

			, , , , , , , , , , , , , , , , , , ,	
	The Hand	dler LLC		
( <u>Name of the Limite</u>	d Liability Compa	ny as it now appea	rs on our records.)	<del> </del>
	A Fronda Elimica I	sidonity Company)		
The Articles of Organization for this Limited	Liability Company	were filed on	08/12/2009	and assigned
Florida document number L0900007	<u>78465</u> .			
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liab	oility company he	re:	
The new name must be distinguishable and end w "L.L.C."	vith the words "Lim	ited Liability Comp	any," the designation "l	LC" or the abbreviation
Enter new principal offices address, if applicable:		3499 Summerwood Way		
(Principal office address MUST BE A STREET ADDRESS)		Lakeland, FL 33812		
Enter new mailing address, if applicable:		3499 Summerwood Way		
(Mailing address MAY BE A POST OFFICE BOX)		Lakeland, FL 33812		
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter t</u>	he name of the nev
Name of New Registered Agent:				
New Registered Office Address:	3499 Summ	nerwood Way		
		En	ter Florida street add	ress
		Lakeland	, Florida	33812
		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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

	- Manager I = Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			Add Remove
			Add Remove
			Add Remove
			Add Remove
	<del>-</del>		Add Remove
			Add Remove
D. If a		e(s) here: (Attach additional sheets, if necessary.) Address and Registered Agent address	
	all to 3499 Summerwood Way, Lakel		SECRETARY OF STATE SIVISION OF CORPORATION  11 JUN - 3 PH 12: 01
Dated _	June 01, 20.  Signature of a member	11 Mariana in the state of a member of a member	TATE ATTOMS
	Yanina Balle	esteros (MGRM & RA)	

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Filing Fee: \$25.00