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EXAMINER

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GEORGIARY OF STATE

TALLAHASSEF, FI STATE

COVER LETTER

TO: Registration So Division of Con				
	with the state		Poverse in the	• •
		Handyman Services LLC		
SUBJECT:	Name of Limi	Handyman Services LLC ted Liability Company	,	
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	5, 4- 1 · · · · · · · · · · · · · · · · · ·	
	ondence concerning this matter	-		
		David Rainey		
		Name of Person		
	D&D Floorin	ng and Handyman Services L	LC	
	DQD 1 loom	Firm/Company		
	•			- E
		86 S Adams St		Por S
		Address '		TIL 27
BOND OF BUILDING	• В	everly Hills, FL 34465		
and the second	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code		P. P.
	dr	aineysr@hotmail.com		H 2: 40 FETATE
	E-mail address: (to be used for future annual report notifica	ation)	STATE STATE
For further information of 3217 (c.	concerning this matter, please's	allingest gestic Habitation (accinias inch	,	F
D	avid Rainey		00-6303	
Name of States	of Person ²³	Area Code & Daytime T	Telephone Number	
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Certificate C	of Status &
		(additional copy is enclosed)		copy is enclosed)
MAIL	ING ADDRESS:	ŞTREET/COURIE	R ADDRESS:	

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

. D&D Flooring and (Name of the Limited Liability (A Florida Li	l Handyman Ser	vices LLC		
(A Florida Li	mited Liability Company	y)		
The Articles of Organization for this Limited Liability Co	mpany were filed on _	February 17, 2010	_ and assigned	
Florida document numberL10000018332	_•			
This amendment is submitted to amend the following:	er y i i i i i i i i i i i i i i i i i i	casper is recessive.		
A. If amending name, enter the new name of the limit	ed liability company l	<u>1ere</u> :		
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Con		2	_ tion
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRI	ESS)	LAHASSE		·
	 	114	·	÷
Enter new mailing address, if applicable:		F		
(Mailing address MAY BE A POST OFFICE BOX)		127 T	71 63	_
				-
B. If amending the registered agent and/or registe registered agent and/or the new registered office address.		n our records, <u>enter the</u>	e name of the r	<u>1ew</u>
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·		_
New Registered Office Address:				_
		Enter Florida street addre	SS	
	City	, Florida	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager
MGRM = Managing Member

Title	<u>Name</u>	Address	Type of Action
MGMR	David A Rainey 2nd	2014 Apt A Milton St Inverness, FL 34453	☑ Add ☐ Remove
***************************************			☐ Add ☐ Remove
·			Add Remove
,			Add Remove
			Add Remove
			Addi Remove
D. If amend	ing any other information, en	ter change(s) here: (Attach additional sheets, if necessary)	FIN
			- -
Dated	June 26	, 2010 2010 2010	
	Signature of	f a member or authorized representative of a member David A Rainey Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00