## L10000110546

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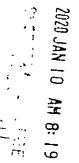
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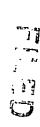
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FEB 1 0 2020







## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: A Helping Hand, LCC.  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Constantine Christoforakis
A Helping Hand, LLC.
844 Williams Lane
Port Orange, FL 32127 City/Sulte and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Constantine Christoforakis at 386 846-4892  Name of Person  Area Code  Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  S55.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed)

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

Name of the Limited Liability Compa (A Florida Limited	Lisbility Company)	ecords.)		
The Articles of Organization for this Limited Liability Company	were filed on M.	9.3010 and a	ssigne	d
Florida document number LICOCONO546			Ū	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation	'L.L.C."	<del></del>
Enter new principal offices address, if applicable:	<u> </u>			
(Principal office address MUST BE A STREET ADDRESS)			202	
		بار بار	ال (ا	<u></u>
			<b>Z</b>	
Enter new mailing address, if applicable:		· "	0	j
(Mailing address MAY BE A POST OFFICE BOX)		•,	AM	
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		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>e</u>	nter the name of the n	ew reg	istered
Name of New Registered Agent:	<del></del> .			
New Registered Office Address:				
	Enter Florida street a	ddress		
<u> </u>		, Florida		
	City	Zip Cod	e	
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>	<u>Name</u>	Address	Type of Action
		<del></del>	□Add
			□Remove
			☐ Change
<del></del>			□Add
		<del></del>	□Remove
			☐ Change
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		<del></del>	☐ Change
<del> </del>			□ Add
			Remove
			Change

	Article III is added as follows:
Ī	rembership Interest Certificates small be usued to
	the members. The interest represented by the
	Certificate may only be transferred by a transfer of the certificate.
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t an ett <mark>Vote:</mark>	ive date, if other than the date of filing: 13/13/2019 (optional) ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as earl's effective date on the Department of State's records.
recor	d 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 led.
	D 1 1741 2.11
	December 13th, 2019.  Signature of a member or authorized representative of a member

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Filing Fee: \$25.00