

L11000114215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

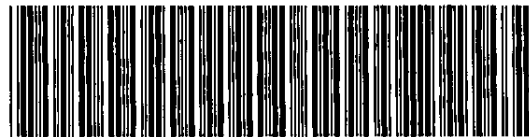
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 11 2013

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Robert Campbell Handyman, LLC

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:

Brenda Chambers

Name of Person

Total Business Solutions-Bookkeeping Division

Firm/Company

603 N Ferdon Blvd.

Address

Crestview, FL 32536

City/State and Zip Code

brenda@tbscrestview.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brenda Chambers

Name of Person

at (850) 423-1099

Area Code & Daytime 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 enclosed)

☐ \$60.00 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
13 OCT -9 PM 3:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Robert Campbell Handyman, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/05/2011 and assigned
Florida document number L11000114215.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3081 Highland Avenue

Crestview, FL 32539

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3081 Highland Avenue

Crestview, FL 32539

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Total Business Solutions-Bookkeeping Division

New Registered Office Address:

603 N. Ferdon Blvd.

Enter Florida street address

Crestview

City

Florida 32536

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.

Brenda Chambers
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Gary S. Crooks	255 E. Cane Avenue	<input checked="" type="checkbox"/> Add
		Crestview, FL 32539	<input type="checkbox"/> Remove
MGR	Joey A. Lavin	3083 Highland Avenue	<input checked="" type="checkbox"/> Add
		Crestview, FL 32539	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated October 04, 2013

Brenda Chambers

Signature of a member or authorized representative of a member

Brenda Chambers

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00