L17006 119726

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100265143891

10/14/14--01048--020 **25.00



COVER LETTER

TO: • Registration Section
Division of Corporations

GEM'S HANDYMAN SERVICE 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:

ERIC'K CACERES

Name of Person

GEM'S HANDYMAN SERVICE LLC

Firm/Company

2701 10TH STREET WEST

Address

LEHIGH ACRES, FL 33971

City/State and Zip Code

INFO@CROWNKINGSINC.COM

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

For further information concerning this matter, please call:

ERIC K CACERES

₄,239,645-8436

Name of Person

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

GEM'S HANDYMAN SER		
(Name of the Limited Liability Company a (A Florida Limited Liabi	it now appears on our records.) Ity Company)	
The Articles of Organization for this Limited Liability Company wer Florida document number <u>L13000119326</u> .	e filed on August 23, 2013	and assigned
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 abl	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
_		
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	address on our records, enter the	he name of the new
Name of New Registered Agent:	>	1 2 2
New Registered Office Address:		700 P
	Enter Florida street address	The state of the s
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	- 0 - N	- W
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete per, accept the obligations of my position as registered agent as prov being filed to merely reflect a change in the registered office add company has been notified in writing of this change.	formance of my duties, and I am fa ided for in Chapter 605, F.S. Or, ij	miliar with and this document is

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ERIC K CACERES	2701 10TH ST W	Add
		LEHIGH ACRES, FL 339	971 □ Remove
			Remove
<u> </u>		·	Add
			Remove
			□ Add
			S Remove
			A 211 211 211 211 211 211 211 211 211 21
		DRIU)	Remove
			□ Remove

2. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary	·.)
•	
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)	
Dated October 10 2014	
Eur Hever & the	
Signature of a member of authorized representative of a member ERIC K CACERES / MARILYN CACERES	

Page 3 of 3

Filing Fee: \$25.00

14 OCT 14. PM 2: 35
SECRETARY OF STATE
TALLAHASSEF FLOOR