

L140000071238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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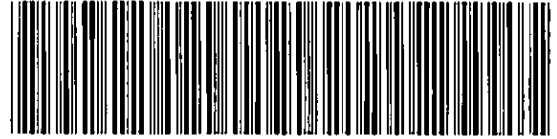
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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FEB 26 2019

S. PRATHER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Mrgs smokehouse and seafood grill 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:

Shannon L George

Name of Person

mrgr smokehouse and seafood grill

Firm/Company

298 quarterhorse rd

Address

port st joe florida 32456

City/State and Zip Code

mrgrsgrill2@gmail.com

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

For further information concerning this matter, please call:

shannon George

757 532-1863
at ()

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 Sta
Certified Copy
(additional copy is c)

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

mrgr smokehouse and seafood grill

(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 5/2/14

Florida document number L14000071238

This amendment is submitted to amend the following:

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

MV G's Handyman Services LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevi

Enter new principal offices address, if applicable:

298 quarterhorse rd

(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 address on our records, enter the registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

_____, **Florida**
City

2

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 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 th

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

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

changing to construction industry

Handyman/ maintenance services

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CLERK OF SUPERIOR COURT
ALLAHABAD, N.Y.

E. Effective date, if other than the date of filing: _____ **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursu

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n
document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on th
(b) The 90th day after the record is filed.

Dated 2/26, 2019.

