

U4000090783

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

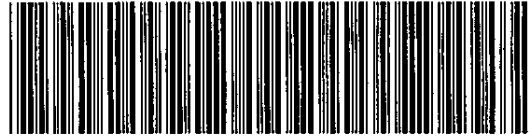
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FILED
15 JUN 24 AM 10:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 JUN 24 AM 10:41

JUL 24 2015

S. YOUNG



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 26, 2015

FLOYD M CAIN
427 BULLARD AVENUE E
LAKE WALES, FL 33853

SUBJECT: HANDYMAN CONNECTION OF POLK COUNTY LLC
Ref. Number: L14000090783

FILED
15 JUN 24 PM 10:22
SECRETARY OF STATE
TALLAHASSEE, FL 32314

We have received your document for HANDYMAN CONNECTION OF POLK COUNTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young
Regulatory Specialist II

Letter Number: 315A00013431

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Handyman Connection of Polk County 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:

Floyd M. Cain

Name of Person

Handyman Connection of Polk County LLC

Firm/Company

427 Bullard Ave, E

Address

Lake Wales, FL 33853

City/State and Zip Code

mitchellcain55@gmail.com

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

For further information concerning this matter, please call:

Floyd M. Cain

Name of Person

at

859

Area Code

621-5713

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

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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

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

Handyman Connection of Polk County 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 06/05/2014 and assigned
Florida document number L14000090783

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 contain 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)

427 Bullard Ave, E

Lake Wales, FL 33853

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

427 Bullard Ave, E

Lake Wales, FL 33853

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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:

Floyd M. Cain

New Registered Office Address:

427 Bullard Ave, E

Enter Florida street address

Lake Wales

Florida 33853

City

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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	James D. Rose		<input type="checkbox"/> Add
		4627 Madison Ave, Lake Wales, FL	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Floyd M Cain	427- BULLARD AVE EAST LAKE WALES FL	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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

15
REC'D
FALL

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.) Pursuant to 605.0207 (3)(b)

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

FILE
JUN 24
SECRETARY OF STATE
TALLAHASSEE
FLORIDA
10:23 AM
Pursuant to 68 USC 3501(c)(1),
this document contains neither
recommendations nor conclusions
of the FBI. It is the property
of the FBI and is loaned to your agency;
it and its contents are not to be
distributed outside your agency.

If the record 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 record is filed.

Dated 7-11-15.

Signature of a member or authorized representative of a member

Floyd M. Cain

Floyd Mitchell Cain
Typed or printed name of signee

Typed or printed name of signee