

# L14000124982

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

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(City/State/Zip/Phone #)

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PICK-UP

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MAIL

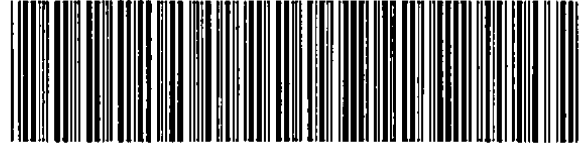
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(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 21 2019  
C. H. H. H. H.

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ryans Handyman Professionals LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa K. Ryan

Name of Person

Ryans Handyman Professionals LLC

Firm/Company

4925 Terrapin Blvd.

Address

Saint Cloud, Florida 34771

City/State and Zip Code

mryan4192008@gmail.com

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

For further information concerning this matter, please call:

Melissa K. Ryan

at (407) 307-5841

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

2019 AUG 14 PM 12:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: Ryans Handyman Professionals LLC
2. (a) Ryans Handyman Professionals LLC  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
4925 Terrapin Blvd.  
Saint Cloud, Florida 34771
- (b) Ryans Handyman Professionals LLC  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
4925 Terrapin Blvd.  
Saint Cloud, Florida 34771
3. August 8, 2014  
Date of filing/registration in Florida
4. L14000124982  
Document number
5. (a) Daniel W. Ryan  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Ryans Handyman Professionals LLC  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
4925 Terrapin Blvd.  
Saint Cloud, FL 34771
- (b) Melissa K. Ryan  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
Ryans Handyman Professionals LLC  
NEW Registered Office Address:  
same as existing  
, FL

2014 AUG 14 PM 12:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Daniel W. Ryan

Signature of a member or authorized representative of a member

Daniel W. Ryan

Printed or typed name of signer

*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.*

Melissa K. Ryan

Signature of Registered Agent