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SERVETANY OF STATE

B. BOSTICK
DEC 1 6 2014
EXAMINER

TO: Registration Se Division of Cor			
Handyma	an Brothers LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	·	
	Rodney Waits		
		Name of Person	
	Handyman Brothers	LLC	
		Firm/Company	
	PO Box 11872		
		Address	電視器 元
	Pensacola, FI 32524	1	FORMATION SE
		City/State and Zip Code	三部 2 0
	Handymanbrotherslid		SE SE
For further information c	oncerning this matter, please co	to be used for future annual report notification) all:	AM 10: 00 REGRATION SERVICES
Rodney Waits		850 748-1521	SHS DO
	f Person	at (
Enclosed is a check for the			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & S60.00 Filing Certified Copy Certificate (additional copy is enclosed) Certified C (additional co	of Sama & Copy A
	ING ADDRESS: ration Section	STREET/COURIER ADDRESS: Registration Section	J. O.

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Registration Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Handyman Brothers LLC (Name of the Limited Liability Compa (A Florida Limited)	ny as it now appears on our records)
The Articles of Organization for this Limited Liability Company Florida document number	0	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	pility Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	mily company, are designation and	
(Principal office address MUST BE A STREET ADDRESS)		28 28
Enter new mailing address, if applicable:	PO Box 11872	THE COLUMN TO TH
(Mailing address MAY BE A POST OFFICE BOX)	Pensacola FI, 32524	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her Name of New Registered Agent:		enter the name of the new
New Registered Office Address:	Enter Florida street address	
	, Flo	rida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	, i	ир соне
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as	performance of my duties, and	d I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
AMBR	Parrish Smith	W. 40 Nine Mile Rd	□ Add
		Pensacola, Fl 32534	■ Remove
			□ Add
			☐ Remove
			Add 22 Add 25 Amove TAR
			TARY OF SHITE OR Remove
			Add Remove
			Add
			□ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)				
Change of mailing address for Company				
tronge of mailing address for Company from "W. 40 Nine Mile Rd Pensodela FL 32534				
+0				
P.C Bex 11872 Personals # 32824				
E. Effective date, if other than the date of filing:				
Dated				
M. Mart Lite				
Signature of a member or authorized representative of a member				
Kodney Worts				

Page 3 of 3

Filing Fee: \$25.00

TILED WINDER II P 3: 02

STATEMENT OF MEMBER

DISSOCIATION FROM

HANDYMAN BROTHERS LLC

The following member of the Limited Liability Company hereby recognizes that they have been relieved of all fiduciary duties and ownership rights related to the Limited Liability Company (LLC) in accordance with the "Operating Agreement" of Handyman Brothers LLC.

dissociated:				ch member has	
		Hand	ymon Brothers Li	-C	<u>.</u>
2.	Name of member wh	o has been disso) ociated, the "Dissociated Memb	per," from Limited	
	Liability Company:	Pac	rish Smith	芒路 温	
	Name			DEC DEC	=
		<u> </u>	to Nine Mile Rd	55 =	- [7]
	Street Address			THE TO	
	Pensacla	FI	32834	3: 02	_
	City	State	Zip Code	***	
3.	This statement, considered as the "Dissociation Statement," is affective as of:				
	11	128/14			_
	Date				

Terms of Dissociation

I. On specified date the Dissociated Member hereby agrees and recognizes, as in accordance with the Operating Agreement, that any and all documents, payments/deposits, receipts, certificates, etc. related to Company affairs must be turned in to remaining members of Company within "Reasonable Time", defined as within three (3) days after specified date, in order to continue regular business affairs and to prevent harm to Company. If any related business documents are received after specified date then they are held under the same terms from the date that the documents are received.

- II. The Dissociated Member agrees to act in good faith and to minimize any present or future harm done to the remaining "Members," as defined in Operating Agreement, and Company. Dissociated Member also agrees to take reasonable effort to complete dissociation in Reasonable Time under same reasoning for the continuation of regular business affairs.
- III. Any and all expenses, payments, profits, losses, or related Company financials must be turned in to and accounted for by remaining Members and payout of profits will be paid to Dissociated Member within specified time as defined under Operating Agreement, under the heading titled "Dissociation of a Member." After payment of profits due, any and all future ownership rights or business attachment of Dissociated Member to company will be considered void.
- IV. The shares, percentage of ownership, and future profit payouts are hereby and henceforth from specified date considered as the Company's and all previous rights of Dissociated Member are deemed to be distributed among remaining Members as specified under a separate agreement in which will be determined at a future place and time.

In the event that dispute arises concerning this Dissociation Statement then associated parties will attempt to resolve through friendly consultation and determine this statement with goodwill and the well-being of Company will be considered top priority.

		<u> </u>	
Parrish Smith (Dissociated Member)	Date	LANAS.	77
P. Martin Wartes	11/28/	14 E	רח כ
Rodney Waits (Member/Owner)	Date	3: 02	
Laylor Waits	_11/22/	14	_
Taylor Waits (Member/Co-Owner)	Date		

Involuntary Withdraw of Dissociated Member

This document is to be associated with the Disclosure Statement, and is to be used in the case that the Dissociated Member denies to sign in order to end all fiduciary duties and to transfer shares/ownership of the Company. As stated in Heading/Article thirty-two (32) of the Operating Agreement the Dissociated Member will no longer be associated with Company and is relieved of all fiduciary duties through Involuntary Withdraw.

The Dissociated Member, as identified, has failed to:

- Complete fiduciary duties in a timely manner.
- Keep regular communication with other Members of Company.
- Provide quality client interaction.
- Estimate and provide services necessary to complete projects in a timely and profitable manner.
- Present business forms/documents on request in a timely manner.

Name of member	wno nas been	dissociated, the Dissociated Mer	nder," from Limited Liability
Company:	Kons	mer Bretters LLC	Parrich Smith
Name			
	W.40	Vine Mile Rd	214 DEC 11
Street Address			
Persecola	FI	32834	
City	State	Zip Code	3. 02
Authorized/Appro	ved/Witnessed	i by:	11/28/2014
Rodney Waits (Me	ember/Owner)	Date	
Taylor Li	alto		1/28/2014
Taylor Waits (Mei	mber/Co-Own	er) Date	