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COVER LETTER

TO:	Registration Se Division of Cor	porations &		, ""	
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SUBJI	ECT:	Name of Lim	ited Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		DAN HEZLEP SR			
Name of Person DAN HEZLEP SERVICES LLC Firm/Company 35440 LAKE UNITY RD					
DAN HEZLEP SERVICES LLC Firm/Company					
	Firm/Company 35440 LAKE UNITY RD Address				
	35440 LAKE UNITY RD				
		Firm/Company 35440 LAKE UNITY RD Address FRUITLAND PARK FL 34731 City/State and Zip Code dhhandymanllc@gmail.com			
		<u> </u>	•		
		DAN HEZLEP SERVICES LLC Name of Limited Liability Company			
For fur	ther information c		•	ication)	
	HEZLEP SR	C 71	352 255-3427		
	Name o	f Person		: Telephone Number	
Enclos	ed is a check for th	ne following amount:			
□ \$2:	5.00 Filing Fee		Certified Copy	□ \$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 FILED OF 2015 SEP - 1 PH 12: 10

DAN HEZLEP SERVICES LLC

ERVICES LLC

SECRETARY OF STATE

TATE AHASSEE FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)

(A Florid	a Limited Liability Company)						
The Articles of Organization for this Limited Liability C Florida document number L14000176016	Company were filed on NOV. 12, 2014	and assigned					
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the lim	nited liability company here:						
The new name must be distinguishable and contain the words "Lim	nited 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 ADDI	RESS)						

Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX)	 						
B. If amending the registered agent and/or registered agent and/or the new registered office add		, enter the name of the					
Name of New Registered Agent:		 					
New Registered Office Address:		· · · · · · · · · · · · · · · · · · ·					
	Enter Florida street address						
	, Flo	oridaZip Code					
	City	zip coue					

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>	Name	Address	Type of Action
MGR	DAVID SMART JR	701 PENNSYLVANIA AVE	■ Add
		FRUITLAND PARK FL 34731	Remove
		 	☐ Change
AMBR	DAN HEZLEP SR	35440 LAKE UNITY RD	□ Add
		FRUITLAND PARK FL 34731	□ Remove
			■ Change
			
			Remove
		·····	☐ Change
			
	•	 	□ Remove
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Effective date, if other than the da	te of filing:	26, 2015		(optiona	$\mathbb{R}^{\mathbb{Z}}$	2	<u></u>
f an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	does not meet the ap	pplicable statutor					
e record specifies a delayed e The 90th day after the record	ffective date, bu d is filed.	t not an effec	tive time, at 12	2:01 a.m	. on t	he ea	arlier o
Dated AUGUST 26	2015						
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Typed or printed name of signee

Filing Fee: \$25.00