# 115000023681

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
	101 1 77: 101	
(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number	)
·	·	
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	



100270385111

03/11/15--01019--017 \*\*55.00

TALLAHASSEE, FLORIDA

Office Use Only

## **COVER LETTER**

Division of Corp			
Serrano (	Carpentry and Handyma	n Services LLC.	
SUBJECT.	Name of Limite	ed Liability Company	<del> </del>
The enclosed Articles of	Amendment and fee(s) are subm	itted for filing.	
Please return all correspo	ndence concerning this matter to	the following:	
	Ariel Serrano		
		Name of Person	
	Serrano Carpentry an	d Handyman Services LLC	
		Firm/Company	
	107 Lochness lane		
		Address	
	Kissimmee Fla 34743	i	
		City/State and Zip Code	
	arielserrano2@gmail.c	com  be used for future annual report notifies	ation)
For further information of	oncerning this matter, please cal		
Ariel Serrano	oncerning this matter, preuse can	407 535-1543	
Name of	cn.	at ( )	elephone Number
Name of	rerson	Area Code Daytime I	elephone Number
Enclosed is a check for the	ne 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



March 30, 2015

ARIEL SERRANO 107 LOCHNESS LANE KISSIMMEE, FL 34743

SUBJECT: SERRANO CARPENTRY AND HANDYMAN SERVICES LLC

Ref. Number: L15000023681

We have received your document for SERRANO CARPENTRY AND HANDYMAN SERVICES LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

If you want to add yourself on the LLC filing then you need to complete section C on page 2 of the Amendment.

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.

Tim Burch Regulatory Specialist II

Letter Number: 415A00006309

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Serrano Carpentry and Handyman		
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L15000023681		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and end with the words "Limit	ted Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	CSS)	
		<u> </u>
Enter new mailing address, if applicable:		APR I
(Mailing address MAY BE A POST OFFICE BOX)		ALL O
		3 3 11
B. If amending the registered agent and/or registered agent and/or the new registered office addre		er the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
<del></del>	, FIOFICIA	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member **Type of Action Title** <u>Address</u> Name MGR Ariel Serrano 107 Lochness Lane ■ Add Kissimmee FL 34743 \_□ Remove \_□ Add \_□ Remove □ Remove □ Add ☐ Remove □ Add □ Remove

		<del></del>	
<del></del>	4/40/0045	<del>.</del> :	
e effective date must be spec	tan the date of filing:  4/10/2015  ific, cannot be prior to date of receipt or filed date and cannot be more than by the Florida Department of State)	_ (optional) 90 days after	
e effective date must be spec the date this document is filed March 6	ian the date of filing:	_ <b>(optional)</b> 90 days after	
e effective date must be spec e date this document is filed March 6	ific, cannot be prior to date of receipt or filed date and cannot be more than by the Florida Department of State)  2015	90 days after	in CD
te effective date must be specie date this document is filed attending March 6	ific, cannot be prior to date of receipt or filed date and cannot be more than by the Florida Department of State)  2015  Signature of a member or authorized representative of a member	90 days after	
e effective date must be spec the date this document is filed March 6	ific, cannot be prior to date of receipt or filed date and cannot be more than by the Florida Department of State)  2015  Signature of a member or authorized representative of a member	90 days after	<del>نترز</del> <del>0</del>

Page 3 of 3

Filing Fee: \$25.00