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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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TO:		stration Section of Corp			
CUDIE		HANDYMA	N MARIO LLC	•	
SUBJE	CI: _		Name of Lim	ited Liability Company	
The enc	losed /	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn a	ill correspor	dence concerning this matter	to the following:	
			JAMES HUGGINS		
				Name of Person	
			HANDYMAN MARIO LI	.c	
			Amendment and fee(s) are submitted for filing. Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: JAMES HUGGINS Name of Person HANDYMAN MARIO LLC Firm/Company 1735 CROTON RD STE B Address MELBOURNE, FL 32935 City/State and Zip Code TOMEZ.1735@AOL.COM E-mail address: (to be used for future annual report notification) concerning this matter, please call: Area Code Daytime Telephone Number the following amount: S30.00 Filing Fee & Certificate of Status Certificate of Status Street Address: Registration Section Corporations Preson Corporations The Centre of Tallahassee		
			1735 CROTON RD STE B	3	
				Address	
			MELBOURNE, FL 3293	5	
			Firm/Company 1735 CROTON RD STE B Address MELBOURNE, FL 32935 City/State and Zip Code TOMEZ1735@AOL.COM E-mail address: (to be used for future annual report notification) attion concerning this matter, please call: S at ()		
			_		
For furti	her inf	ormution co			heation)
JAMES					
		Name of	Person	Area Code Daytime	e Telephone Number
Enclose	ed is a c	check for the	e following amount:		
€ \$25	5.00 Fi	ling Fec		Certified Copy	Certificate of Status & Certified Copy
		ing Address			ction
	_			-	
	P.O.	Box 632	7		
	Tall	ahassee, F	L 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HANDYMAN MARIO LLC		
(Name of the Limited Liabili (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 3/16/2015	and assigned
Florida document number L15000059406		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the lim	ited liability company here:	
		202
he new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDI	RESS)	o m
		<u></u>
		-
nter new mailing address, if applicable:		<u>+</u>
Mailing address MAY BE A POST OFFICE BOX)		
If amending the registered agent and/or registere gent and/or the new registered office address here:	d office address on our records, <u>enter th</u>	e name of the new registe
cent units of the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		
Acquisited Office Address.	Enter Florida street address	
	, Flori	ida
	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 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>	Address	Type of Action
MGR	TIMOTHY BRYAN BERG	974 SARETA ST SE PALM BAY, FL 32909	= Add
			Remove
			□Change
MGR	ANTONYO JOHNSON	1840 BRIDGEWATER DR #246 MELB, FL 32934	🗆 Add
			≅Remove
			□Change
			2020 FT
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ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior te: If the date inserted in this block does not meet the application.	(optional) o date of filing or more than 90 days after filing.) Purs ble statutory filing requirements, this date will	suant to 605.020 not be listed a
cument's effective date on the Department of State's records.		
cord specifies a delayed effective date, but not an effective ti	ne at 12:01 a.m. on the earlier of: (h). The 90t	h day after th
s filed.	ic, at 12.01 a.m. on the carrier of (b)	ii day aitei di
12/04/2020		
ted 12/04/2020		
1100 - 13 1110 1 4		
JAMES HUGGINS	ized representative of a member	