L16000103143

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL
(Address) (City/State/Zip/Phone #)
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(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
PÍCK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to a ting Officer.



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2025 OCT -8 AH 7: 58

Office Use Only

611-524-62Ue.

y 10/9/2025

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Corp	porations		
•		DYMAN SERVICES LL	.C
SUBJECT:	Name of Lim	ited Liability Company	
The applaced Articles of	Amendment and fee(s) are sub	unitted for filing	
		-	
Please return all correspo	ndence concerning this matter	to the following:	
		NICOLE A ROWE	
		Name of Person	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	· · · · · · · · · · · · · · · · · · ·
71 SW 5TH STREET			
		Address	
		POMPANO BEACH, I	FL 33060
		City/State and Zip Code	
	F-mail address: t	to be used for future annual	report notification)
For further information or			. report normalism
For further information concerning this matter, please call: NICOLE ROWE 973 392-5449		392-5449	
	OWE;	at ()	Daytime Telephone Number
Name of	Person	Area Code	Daytime Telephone Number
Enclosed is a check for th	e following amount:		
	S30,00 Filing Fee & Certificate of Status	☐ \$55.00 Fiting Fee Certified Copy (additional copy is end	Certificate of Status &
		·	
<u>Mailing Address</u> Registration S		<u>Street A</u> Registr	ration Section
Division of C	orporations		on of Corporations
P.O. Box 632	7	The Ce	entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303



September 8, 2025

NICOLE A ROWE 71 SW 5TH STREET POMPANO BEACH, FL 33060

SUBJECT: A & C HANDYMAN SERVICES LLC

Ref. Number: L16000103143

We have received your document for A & C HANDYMAN SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please add the titles for all members listed in your document.

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

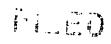
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 525A00020058

Claretha Golden Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



A & CHANDYMAN SERVICES LLC

2025 OCT -8 AM 7: 58

(Name of the Limit	ed Liability Company as it now a (A Florida Limited Liability Comp	pany)	LLALASS PATE	
The Articles of Organization for this Limited Li Florida document numberL16000103143	ability Company were filed o	0.510.13001.4	and assigned	
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liability compa	ny here:		
The new name must be distinguishable and contain the w	ords "Limited Liability Company,"	"the designation "LLC" or the	e abbreviation "L.L.C."	
Enter new principal offices address, if applications	able:	NICOLE A ROWE		
(Principal office address MUST BE A STREET ADDRESS)		71 SW 5TH STREET		
		POMPANO BEACH, I	FL 33060	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE)	ROX)	71 SW 5TH STREET		
maning data etts militaria etts in anna etts	<u></u>	POMPANO BEACH, FL 33060		
agent and/or the new registered office addres Name of New Registered Agent:		E ANTOINETTE ROWE		
New Registered Office Address:	71 SW 5TH STREET			
	Ente	Enter Florida street address		
	POMPANO BEACH	Florida	33060	
	City		Zip Code	
New Registered Agent's Signature, if changing F	Registered Agent:			
I hereby accept the appointment as registere provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the recompany has been notified in writing of this company has been notified in writing of this	er and complete performan stered agent as provided fo registered office address, L	ce of my duties, and I a. r in Chapter 605, F.S. (m familiar with and Or, if this document is	
	If Changing Register	ed 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>	<u>Name</u>	Address	Type of Action
MGR	NICOLE A ROWE	71 SW 5TH STREET	= Add
		POMPANO BEACH, FL 33060	□Remove
			Change
MGR	JEVAUGHN C CASSANOVA	71 SW 5TH STREET	BEACH, FL 33060 Change Cha
		POMPANO BEACH, FL 33060	■ Remove
			□Change
AMBR	ANDREW A CASSANOVA	71 SW 5TH STREET	□Add
		POMPANO BEACH, FL 33060	■ Remove
			□Change
MGZ.	A & C AUTO SALES	71 SW 5TH STREET	= Add
	MGR JEVAUGHN C CASSANOVA PC AMBR ANDREW A CASSANOVA A & C AUTO SALES POMPA	POMPANO BEACH, FL 33060	□Remove
			□Change
			□Add
			□Remove
			□Change
			🗀 Add
			□Remove
			□Change



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Note: If the date inserted in this	ust be specific and cannot be prior to date of filing or more than 90 days after (iling.) Pursuant to 60 block does not meet the applicable statutory filing requirements, this date will not be lis	05.0207 sted as
document's effective date on the	Department of State's records.	
e record specifies a delayed effee rd is filed.	ive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day aft	ier the
JULY 01 Dated	2025	
·	Signature of a member or attithorized representative of a member	
	NICOLE A ROWE	

Filing Fee: \$25.00