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COVER LETTER

TO:	Registration Section Division of Corporations		+		
			e.		
SUBJ	Butch Black Handyman Services,	LLC		·	
		imited Liability Co	ompany		
Dear S	Sir or Madam:				
The er	nclosed Registered Agent/Registered Office Cha	ange and fee(s) are	: submitte	ed for filing.	
Please	return all correspondence concerning this matter	er to the following	;• !•		
CHR	ISTOPHER BENJAMIN				
	Name of Person	·			
THE	BARRISTER FIRM, PA				
	Firm/Company				
THE	EXPERTS BUILDING 600 NW 183RD 8	ST			SECON TO THE SECON
	Address				
MIAN	/II, GARDENS 33169				FILED MILL PH 3-57 AHASSEE, FLORIDA
	City/State and Zip Code				FLOG W
CBE	NJAMIN@THEBARRISTERFIRM.COM				10 S7
·	E-mail address: (to be used for future annual rep	ort notification)			
For fu	rther information concerning this matter, please	call:			
CHR	ISTOPHER BENJAMIN	305 407-	-1180		*
	Name of Person	Area Co	ode & Da	ytime Telep	phone Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING A Registration Division of O P.O. Box 63: Tallahassee,	Section Corporation 27	ons	
	Enclosed is a check for the following amoun	nt:			
	☑ \$25 Filing Fee	□ \$55 Filing F	Fee & Ce	rtified Copy	,
INHSI	8 (2/14)	-			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: BUTCH BLAC	K HA	NDYMAN	I SERVICES LLC	
2. (a)	17150 NW 24TH AVE	((b) 18520 NW 67TH AVE		
(w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (<u>-</u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 134	
	MIAMI GARDENS, FL 33056		SUITE		
		- -	MIAMI,	FL 33015	
	11/28/2016		L160002	215187	
3.5. (a)	Date of filing/registration in Florida EDWIN J. BLACK JR	4.		Document number	
3. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 18520 NW 67TH AVE			te:	
	Registered Office Address (MUST BE FLORIDA STREET A. SUITE 134	DDRES.	<u>S)</u>		
	MIAMI .FL	33015		_ ,	
(b)	CHRISTOPHER BENJAMIN				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u> THE BARRISTER FIRM PA	Office ac	<u>ldress</u> :	THE DAY OF AHASSEE, F	
	NEW Registered Office Address:	 -		vv	
	THE EXPERTS BUILDING 600 NW 183RD	ST	·	3 57 JORNOJ	
	MIAMI GARDENS , FL	33169	ı	_	
the cha agent v was/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the I	he regi bility control the lind imited	stered office ompany, it mited liabili	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.	
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee	
nonyjeo	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I ha d in writing of this change.	e to ac perform for in ereby c	t in this cap pance of my Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	

Signature of Registered Agent