47000018496

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Oktyotato/Zipi) Holic #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

Div	ision of Corp	orations	a		
SUBJECT:		NDYMAN LLC			
		Name of Limi	ted Liability Company		
The enclosed	f Articles of A	mendment and fee(s) are subr	nitted for filing.		
Please return	all correspon	dence concerning this matter t	to the following:		
		YUNIOR TERUEL OLIVE	EROS		
			Name of Person		
		PALCO HANDYMAN LL	C		
			Firm/Company		
		7803 ANDALUSIA PLAC	E APT D		
			Address		
		TAMPA FL 33614			
			City/State and Zip Code		
	PALCOHANDYMAN@GMAIL.COM				
		E-mail address; (to	o be used for future annual report notific	ration)	
For further in	nformation cor	neerning this matter, please ca	II:		
YUNIOR TI	ERUEL OLIV	EROS	502 403-0277 at ()		
Name of Person			Area Code Daytime	Telephone Number	
Enclosed is a	check for the	following amount:			
□ \$25.00 F	iling 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:

TO:

Registration Section

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 OF

PALCO HANDYMAN LLC					
(Name of the Lim	ited Liability Compa (A Florida Limited	iny as it now appears on our i Liability Company)	records.)		
The Articles of Organization for this Limited Horida document number L17000018496	Liability Company	were filed on 01/24/2017	and assigned		
his amendment is submitted to amend the fo	llowing:				
a. If amending name, enter the new name	of the limited liab	oility company here:			
PALCO CONSTRUCTION LLC					
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable: <u>Principal office address MUST BE A STREET ADDRESS</u>)		YUNIOR TERUEL OLI	VEROS		
		4014 W WATERS AVE APT 1403			
		TAMPA FL 33614	201 SE		
Enter new mailing address, if applicable:		SAME	FEB 12		
Mailing address MAY BE A POST OFFICE	E BOX)				
3. If amending the registered agent and egistered agent and/or the new registered of	d/or registered o	ffice address on our re e:	ecords, enter the name of the		
Name of New Registered Agent:	YUNIOR TERUEL OLIVEROS				
New Registered Office Address:	4014 W WATI	ERS AVE APT 1403			
		Enter Florida street	address		
	TAMPA		_, Florida <u>33614</u>		
		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.

Toron Oliveros

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			☐ Change
			
			☐ Remove
		· · · · · · · · · · · · · · · · · · ·	☐ Change
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PALCO CONSTRUCTION LLC				
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<u>. </u>				
				
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ffective date, if other than the date o	02/06/2019 of filing:		(optional)	
an effective date is listed, the date must be spe ote: If the date inserted in this block doe	cific and cannot be prior to es not meet the applicab	date of filing or more than	n 90 days after filing.) Pursua	nt to 605,0207
ocument's effective date on the Departme	ent of State's records.	ne statutary triing requ	irements, this date will no	t oc fisted as
e record specifies a delayed effec	tive date, but not	an effective time,	at 12:01 a.m. on the	e earlier of
The 90th day after the record is	filed.			
FEBRUARY 02	2019			
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Yunior Terusignan	sel Oliver	20		
101101 101	9 0 0 0 0 C C			
Signati	ire of a member or authori	zed representative of a m	ember	

Page 3 of 3

Filing Fee: \$25.00