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2020 JUL 29 AM 8: 37

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COVER LETTER

Division of Corporations		
SUBJECT: SEASHORE HANDYMAN AND PAINTING LLC Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
RICHARD CARPENTER Name of Person		
SEASHCRE HANDIMAN AND PAINTIME Firm/Company		
2427 KIMBERLY DRIVE		
LYNN HAVEN FLCR(DA 3244) City/State and Zip Code		
E-mail address: (To be used forfuture annual report notification)		
For further information concerning this matter, please call:		
RICHARD CARPENTIAR at (850) G30-9601 Name of Person Area Code Daytime Telephone Number	2020 JUL 2	
Enclosed is a check for the following amount:	29	18.1.1 6
☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee & ☐	AH 8: 37	and Tarrey

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mailing address MAY BE A POST OFFICE BOX) If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: CHARD CARPENTER DRIVE DRIV			
		2019 and assigned	
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liability company here:		
Enter new principal offices address, if applic	eable:	"LLC" or the abbreviation "L.L.C."	- - -
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)		-
		enter the name of the new registe	ered
Name of New Registered Agent:	RICHARD CARPE	NTER TABLE	- ^스 랫도
New Registered Office Address:	2427 KIMBERLY	DRIVE = 1	ر اعظمارا الجدرات الجدرات
	Enter Florida street LYNN HAVEN City	Florida 32444 \(\frac{3}{2}\) Zip Code \(\pi\)	- January
New Registered Agent's Signature, if changing I	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 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
AMBR	RICHARD CARPENTER	2427 KIMBERLY Dr	□Add
		CYNNHAUEN, FL 32444	Nemove
			□Change
AMBR	MORAUES, LUIS	7150 W HIGHWAY 98	, □Add
		PANAMA CITY BEACH FL	ERemove
DUTT (URIZIS)		32407	Change
MEM BER	HUFFMAN, GEORGE	3915 E 5th ST	□Add
		PANAMA CITY FL 32405	_ ®Kemove
			[]Change
ambr_	EZELL, LARRY	13302 HWY 20	_ de Add
		YOUNGSTOUN, FL327	166 Remove
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ctive date, if other than the date of filing:		(optional)		
effective date is listed, the date must be specific and cannot be prior to da	ate of filing or more tha	1 90 days after filing.) Pursuant to 6	05.02
e: If the date inserted in this block does not meet the applicable ument's effective date on the Department of State's records.	statutory ming requ	irements, this date	WIII HOUDE II	isted
cord specifies a delayed effective date, but not an effective time, if filed.	at 12:01 a.m. on the	carlier of: (b) Th	e 90th day af	fter th
ed JULY 27, 2020				
1901				
	d approxantative of a m	ember		
Signature of a member or authorize	a representative of a m	Cilioci		

Filing Fee: \$25.00