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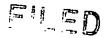
2019 APR 29 AM 9: 17

C. GOLDEN MAY 1 3 2019

COVER LETTER

TO:	Registration Se Division of Cor		!
SUBJE	HANDY H	ANGER, LLC	
SOBJE	.cr.	Name of Limi	ted Liability Company
The en	closed Articles of A	Amendment and fee(s) are subr	nitted for filing.
Please	return all correspo	ndence concerning this matter t	o the following:
		ENRIQUE ANDRADE	
			Name of Person Handy Hunger LLC.
		4241 W 2nd AVE	Firm/Company
		HIALEAH, FL 33012	Address
		enriqueandrade09@gmail.co	City/State and Zip Code
For fur	ther information co	E-mail address: (to oncerning this matter, please ca	o be used for future annual report notification) II:
ENRIÇ	UE ANDRADE		786 443-9526
	Name of	Person	Area Code Daytime Telephone Number
Enclose	ed is a check for th	e following amount:	
■ \$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, 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



HANDY HANGER, LLC

company has been notified in writing of this change.

2019 APR 29 AM 9: 17

(Name of the Limite	d Liability Compa	iny as it now appears (Liability Company)	on our records.)
The Articles of Organization for this Limited Lia Florida document number L17000056091	bility Company		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here	<u>:</u> :
N/A			
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		4241 W 2nd AVE	
(Principal office address MUST BE A STREET	ADDRESS)	HIALEAH, FL 33	012
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>0x)</u>	4241 W 2nd AVE HIALEAH. FL 33	012
B. If amending the registered agent and/o registered agent and/or the new registered offi	r registered of ce address here	fice address on o e:	our records, <u>enter the name of the nev</u>
Name of New Registered Agent:	ENRIQUE ANI	DRADE	
New Registered Office Address:	4241 W 2nd AV		
		Enter Floride	i street address
	HIALEAH		, Florida 33012
		City	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		

If Changing Registered Agent, Signature of New 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

AGR = Manager AMBR = Authorized Member				
tle	<u>Name</u>	Address	Type of Action	
GR	JARRETT MCIVAN	13105 SW 106 AVE		
		MIAMI, FL 33176		
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ffecti	ve date, if other than the date of filing:	04/23/201	(optional)
an effe	ective date is listed, the date must be specific and ca	nnot be prio	r to date of filing or more than 90 days after filing.) Pursuant to 605,0207
<u>ote:</u> ocum	If the date inserted in this block does not mee ent's effective date on the Department of Stat	et the appli	cable statutory filing requirements, this date will not be listed as
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	eard apposition and allowed attacks.		
t rec The	ord specifies a delayed effective dat 90th day after the record is filed.	e, but n	ot an effective time, at 12:01 a.m. on the earlier of
	APRIL 23	2019	
ated _			··
	//www.	[
	Signature of a mer	mber or aud	norized representative of a member
	AMBR	-	

Page 3 of 3

Filing Fee: \$25.00