# 17000159661

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N. CAUSSEAUX OCT 2 - 2018

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: HAN DY MAN & HOME WATCH 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:
KAMIL MADKOUR Name of Person
Firm/Company
1742 LIVINGSTONE STREET Address
City/State and Zip Code  K Sev Vices 17 (2) amail. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KAMIL MAJKOUN at (808) 344-1611  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS: 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



April 25, 2018

KAMIL MADKOUR 1742 LIVINGSTONE ST SARASOTA, FL 34231

SUBJECT: HANDYMAN & HOME WATCH LLC

Ref. Number: L17000159661

We have received your document for HANDYMAN & HOME WATCH 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Letter Number: 718A00008524

Jenna D Harris Regulatory Specialist II

www.sunbiz.org

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 23, 2018

KAMIL MADKOUR 1742 LIVINGSTONE STREET SARASOTA, FL 34231

SUBJECT: HANDYMAN & HOME WATCH LLC

Ref. Number: L17000159661

We have received your document for HANDYMAN & HOME WATCH 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P05000110260 K-SERVICES, INC. (NAME IS HELD FOR ONE YEAR AFTER DISS.).

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) 245-6051.

Nanette Causseaux
Regulatory Specialist II Supervisor
Letter Number: 318A00015125

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Handy Man	XHOME WATCH LLC
(A Florida	ty Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>L1700015966</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	ited liability company here:
KM SERVICE	esit LLC
The new name must be distinguishable and contain the words "Lim	ited Liability Company." the designation "LLC" or the abbreviation "LLLC"
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDI	RESS)
Enter new mailing address, if applicable:	2.0
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amonding the registered agent and/or regis	tered office address on our records, enter the name of the new
registered agent and/or the new registered office add	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	. Florida
	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.

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

$\mathbf{AMBR} = A$	MBR = Authorized Member					
<u>Title</u>	<u>Name</u>	Address	Type of Action			
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(If an effective date is lis Note: If the date ins	ther than the date of sted, the date must be spec serted in this block does e date on the Departme	rific and cannot be prior to s not meet the applica	to date of filing or more	optional (optional) than 90 days after filing equirements, this date	;.) Pursuant to 605.0207 (.
	es a delayed effect after the record is		t an effective tim	ne, at 12:01 a.m.	on the earlier of:
Dated	<b>9</b> 19 (Signatur	7018	rized representative of	a member	
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Page 3 of 3

Filing Fee: \$25.00