<u>L17000171575</u>

(Re	equestor's Name)		
(Ad	dress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	#)	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Name	e)	
(Do	ocument Number)		
Certified Copies	_ Certificates o	of Status	
Special Instructions to Filing Officer:			
2.2.			

Office Use Only



300302556623

08/18/17--01003--025 **50.00

17 AUG 22 PH 3: 28

S. WARREN AUG 2 4 2017



August 21, 2017

SAINT BLANC 1110 SUMMER SPRINGS DR MIDDLEBURG, FL 32068

SUBJECT: THANK HEAVEN HANDYMAN SERVICES, LLC

Ref. Number: L17000171575

We have received your document for THANK HEAVEN HANDYMAN SERVICES, LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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: 217A00017134

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

Division of Community D.O. DOV COOR Well-based Divide 2001

COVER LETTER

TO: Registration Section

Division of Con	porations		
SUBJECT: Than			Services, LLC.
	N	ame of Limited Liability	r Company
Dear Sir or Madam:			
The enclosed Statement	of Correction and fee(s) at	re submitted for filing.	
Please return all correspo	ondence concerning this m	natter to the following:	
Saint Blan	C		
	Name of Person		
	Firm/Company		
1110 Sum	mer Spring	gs Dr.	
	Address		
Middlebur	g FL. 3206	8	
C	ity/State and Zip Code		
	@thhms.ne		
E-mail address: (to	be used for future annual	report notification)	
	and the state of t		
	oncerning this matter, ple		200 7544
Saint Blan		at(<u>904</u>)	206-7511
Name o	of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Tallahassee, Florida 323	01		
Enclosed is a check for	the following amount:		
S25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy
CR2E062 (9/15)			

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: Thank Heaven Handyman Services, LLC. The Florida Document number of the limited liability company is: <u>L17000171575</u> SECOND: Document to be corrected is: Start of business date - Articles of organization THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The start of business date was incorrectly submitted. The start of business date should have been August 16, 2017. Please change the date from 10/31/17 to 08/16/17. Thank you ORWas defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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. Registered Agent's Signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E062 (9/15)