L17000232078

Joshua Camacho
(Requestor's Name) 1849 Justice Circle (Address)
Gulf Breeze, Fl32563
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
24th

Office Use Only



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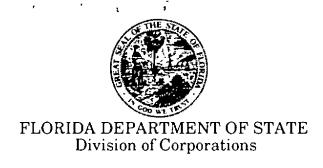
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DIVISION OF COMPONATIONS

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June 22, 2019

JOSHUA CAMACHO 1849 JUSTICE CIRCLE GULF BREEZE, FL 32563

SUBJECT: ALL DAY CONSTRUCTION & HANDYMAN LLC

Ref. Number: L17000232078

We have received your document and check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

PLEASE COMPLETE THE COVER LETTER AND FIRST PAGE OF THE DOCUMENT.

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) 245-6050.

Letter Number: 719A00012619

Darlene Connell
Regulatory Specialist II Supervisor

2019 JUL 24 PH 12: 2

COVER LETTER

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TO: Registration Section Division of Corporations
SUBJECT: ALL DAY CUNSTRUCTION & HANDYMAN 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:
SHAWW DAY Name of Person
AL DAY CONSTRUCTIONS HANDY MAN, LLC
3563 SOUTHWIND DL. Address
GNULF BREEZE, FL 32563 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHAWN DAY Name of Person at (SSC) LoSto - S229 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate of Status & Certificate 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability (A Florida I.	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number 17000232017	ompany were filed on $\frac{1192017}{2}$	and assigned
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 11 2 2 7 and assigned orida document number 1 000237017. This amendment is submitted to amend the following: If amending name, enter the new name of the limited liability company here: If amending name, enter the new name of the limited liability company "the designation "LLC" or the abbreviation "LLC" or		
A. If amending name, enter the new name of the limite	(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) and assigned over \(\sqrt{1000232017} \). mitted to amend the following: . enter the new name of the limited liability company here: inquishable and contain the words "Limited Liability Company" the designation "LLC" or the abbreviation "LLC" offices address, if applicable: \[\text{SYMUST BE A STREET ADDRESS} \) \[\text{SYBEA POST OFFICE BOX} \) registered agent and/or registered office address on our records, enter the name of the new or the new registered office address here: \[\text{VRegistered Agent} : \] red Office Address:	
The new name must be distinguishable and contain the words "Limite	ed Liability Company "the designation "LLC" or the abbrevi	iation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
		TOP 61
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addresses	ered office address on our records, <u>enter the</u> ress here:	name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	City	7 ip 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

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	JOSHUA CAMACHO		Add
		1849 JUSTICE CIR GULF BREEZE, FL 32563	■ Remove
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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 60 date: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list occurrent's effective date on the Department of State's records. a record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the early the 90th day after the record is filed. Signature of a member of authorized representative or a member.	e, if other than the date of filing:		
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Page 3 of 3

Filing Fee: \$25.00