118000139207

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Document Number)
(2.2.2. 2.2.2.)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400405187104

2023 APR 10 PM 3: 4

A. RIVERS MAY 3 0 2023

COVER LETTER

Registration Section

Division of Corporations

Tallahassee, FL 32314

TO:

ALEX'S HANDYMAN SERVICES LLC SUBJECT: 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: OSCAR ALEXANDER MELGAR Name of Person ALEX'S HANDYMAN SERVICES Firm/Company 912 WILMERLING AVE Address SARASOTA, FL 34243 City/State and Zip Code ALEXSHANDYMANSERVICESLLC@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: OSCAR MELGAR Daytime Telephone Number Name of Person 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 Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ALEX'S HANDYMAN SERVICES LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 6/5/2018	and assigned
Florida document number 1.18000139207		
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
RenoVision Home Improvement & Handyman Services LLC		
the new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX)</u>		
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	ume of the new register
Name of New Registered Agent:		APR CRETAG
New Registered Office Address:	Enter Florida street address	
	. Florida	FLORIGIE E
	Cin	SZip Colle

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>	Address	Type of Action
			□Remove
			☐ Change
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
		.	🗀 Add
			[]Remove
			□Change

	-				
<u> </u>					
-					
					
	_				
				·	
-			•		
				<u></u>	
			 		
	, 4° 4°°1°			(A	
ective date, if other than the d effective date is listed, the date must b te: If the date inserted in this bloc nument's effective date on the Dep	e specific and canno k does not meet th	t be prior to date of e applicable statt	tiling or more than 9 story filing require	(optional) 0 days after filing.) Pu ments, this date wil	rsuant to 605,0207 I not be listed as
cord specifies a delayed effective o s filed.	late, but not an eff	ective time, at 12	:01 a.m. on the ea	rlier of: (b) The 9	0th day after the
March 28	202	3			
ed		20			
//					
(y	maturali a membro		esentative of a mem	her	