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06/12/20--01008--014 **60.08





COVER LETTER

Registration Section
Division of Corporations

TO:

Anchor Fer	nce of the Panhandle Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing		
	ondence concerning this matter	_		
	Charles Akers			
	Charles Areas	Name of Person		_
	Anchor Fence of the Panh			200 am 12
	·	Firm/Company		\
	2412 Nicole Dr.			f"i
		Address		P
	Panama City, FL 32405			73
		City/State and Zip Code		- :·
	anchorfenceofthepanhandle			
	E-mail address: (to be used for future annual report not	ification)	
For further information of	oncerning this matter, please c	all:		
Charles Akers		850 630-9485 at ()		
Name o	f Person	Area Code Daytin	ne Telephone Numbe	r
Enclosed is a check for the	he following amount:			
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &
Mailing Address Registration S Division of C P.O. Box 632 Tallahassee, I	Section forporations 7	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	rporations Fallahassee oc Street, Suite 8	310

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Anchor Fence of the Panhandle		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our r Liability Company)	ecords.)
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
lorida document number L19000129491		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ilitv company here:	
Anchor Lawn and Handyman Services LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity 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)		7. 1. 20. 20. 20. 20. 20. 20. 20. 20. 20. 20
	-	سب
		4. A
The control of the second seco		
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		
		7
3. If amending the registered agent and/or registered office a	iddress on our records, <u>e</u>	enter the name of the new regis
gent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	<u></u>	·
	Enter Florida street e	address
		_, Florida
	City	Zip Cock:

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
		·	□Add
			□Remove
			□ Change
			□ Add
			□Remove
			☐ Change
			
			☐Remove
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fective date, if other than the date of filing:	6.71	(optional)	0
n effective date is listed, the date must be specific and cannot be prior to te.: If the date inserted in this block does not meet the applicab	date of filing or more that le statutory filing requ	rements, this date w	rursuant to 605.02 rill not be listed
cument's effective date on the Department of State's records.			
ecord specifies a delayed effective date, but not an effective time	e at 17:01 am on the	earlier of: (b) The	90th day after th
is filed.	c, at relation that	Carrier 51. (6)	your day tires in
ted	. •		
N 1 ////			
Signature of a member or authoris			