

49000234714

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

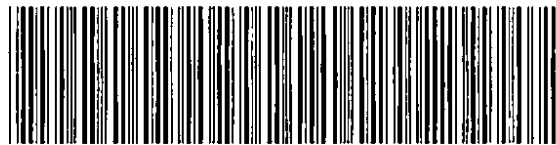
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STATE
APR 27, 2023
FL

2023 JUL 27 PM 7:56

3:00

RECEIVED

R. HUNT

07/27/23

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Wildly Handy 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:

Evan Ogden

Name of Person

Wildly Handy LLC

Firm/Company

2423 SW147th Ave

Address

Miami, Florida, 33185

City/State and Zip Code

evan@wildwoodworker.com

E-mail address: (to be used for future annual report notification)

2023 JUN 27 PM 7:56
TALLAHASSEE, FL
STATE

For further information concerning this matter, please call:

Evan Ogden

786

3214844

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Wildly Handy LLC

(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 09/13/2019 and assigned
Florida document number 1.19000234714.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

13310 SW16th CT

(Principal office address MUST BE A STREET ADDRESS)

Davie, FL, 33325

Enter new mailing address, if applicable:

13310 SW 16th CT

(Mailing address MAY BE A POST OFFICE BOX)

Davie, FL 33325

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

NAME	ADDRESS	CITY	STATE	ZIP	PHONE	DATE	TIME	STATUS
								<input type="checkbox"/> Add
								<input type="checkbox"/> Remove
								<input type="checkbox"/> Change
								<input type="checkbox"/> Add
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								<input type="checkbox"/> Change
						2009		<input type="checkbox"/> Add
						27	PH 7:57	<input type="checkbox"/> Remove
						UT STATE		<input type="checkbox"/> Change
						SEE FL		<input type="checkbox"/> Add
								<input type="checkbox"/> Remove
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2013 JUN 27 PM 7:57
FLORIDA STATE
UNIVERSITY

2003 JUN 27 PM 7:57
OFF STATE
SEE FL

(If 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 605.0207 (3)(b)

Dated 07/19/2023 1:30pm

Evan Ogden

Filing Fee: \$25.00