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CALLAHASSEE, FLORID

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## **COVER LETTER**

TO:

Registration Section

REC

Division of Cor	porations			
SUBJECT: <u>T</u> N	T HANDY MAN Name of Limit	ELECTRIC AND C ed Liability Company	AMERA ÎNSTALL INC	<u>۔</u>
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.		
Please return all correspo	ondence concerning this matter to	the following:		
	Typone	Alexander M	Moss Jr.	
		TRIC AND CAMERA INST		
	1877 N.	W 57 57 Address	<del></del>	
	MIAN	11, FL 33142 City/State and Zip Code		
	TSUM + E-mail address: (to	7236 amail Co	OPA cation)	
For further information e	oncerning this matter, please cal	T:		
Typons Name o	MOSS JR	at ( <u>305</u> ) <u>46.7-</u> Area Code Daytime	Telephone Number	
Enclosed is a check for th	ne following amount:			
☐ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Addres</u> Registration !		<u>Street Address:</u> Registration Sect	ion	
Division of C	Corporations	Division of Corpo		
P.O. Box 632 Tallahassee, l		The Centre of Ta 2415 N. Monroe		
rananassee, i	じし コムチ14	ZH LUIN, IVIOIII OC	SHEER SHIE DIV	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INI HANDUMAN ELECTRIC AND	CAMERA TRISTALL THIC	<u>.                                      </u>
IWI HAWNUMAW FLECTRIC AND (Name of the Limited Liability Compa (A Florida Limited E	inv as it now appears on our records.) Liability Company)	2828
The Articles of Organization for this Limited Liability Company	were filed on <u>D/-23-2020</u>	and assigned.
Florida document number <u>L 20000029141</u> .		ASSI
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab  TNT HANDYMAN Electric and d  The new name must be distinguishable and contain the words "Lamited Liabile".	Caniera Install	Service of 1 2 m
The new name must be distinguishable and contain the words. Elimited Liabs		
Enter new principal offices address, if applicable:	1877 N:W 575	7
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FC 33/4.	<del>1</del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:		
Name of New Registered Agent: Tyro	NE ALEXANDER MOS	5 JR
New Registered Office Address: 187/	7 N.W 5 757 Emer Florida sweet address	
	<u>                                      </u>	33142 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 filled 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.

H 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
MUR	Typone Alexander Moi JR	1877 N.W. S.7 S.T. Metally Fl.3	1342_Add
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<u>ote:</u> 11 the date inser	er than the date of fi I, the date must be specific ted in this block does n ate on the Department	ot meet the applicat	-23-202 date of filing or more ble statutory filing to	(optional than 90 days after fifting quirements, this days	d) ng.) Pursuant to 605.020 ite will not be listed a
record specifies a delais filed.	ayed effective date, but	not an effective tim	ie, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
nted <u>OÝ.</u>	8-2020				
	Signature	of a member or authori	ized representative of	i member	
	Typine	dt .	1 Mario		

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

Filing Fee: \$25.00