(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
(= 3 =)				
PICK-UP WAIT MAIL				
				
(0)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: 4 5/08				
Special Instructions to Filing Officer: 5/08				
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COVER LETTER

	Division of C	Corporations					
SUBJEC		ERC'S PAINTING SERVICES L	LC				
SUBJEC							
The enclo	osed Articles	of Amendment and fee(s) are sub	omitted for filling.				
Please ret	turn all corre	spondence concerning this matter	to the following:				
		POLLY, JENIFER N					
			Name of Person				
	J & J MERC'S PAINTING SERVICES LLC						
	Firm/Company						
	913 CATALINA DR						
	Address						
		SANFORD/ FLORIDA/ 32271					
		JENIFERPOLLY36@GM/	City/State and Zip Code				
		E-mail address:	to be used for future annual report notif	fication)			
For further	er informatio	on concerning this matter, please of	all:				
JENIFER POLLY Name of Person			407 558 4698				
		ne of Person	Area Code Daytime	e Telephone Number			
Enclosed	is a check to	or the following amount:					
□ \$25.0	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 Ado Registratio		<u>Street Address:</u> Registration Sec	rtion FE3 - % 2023			
Division of Corporations P.O. Box 6327		f Corporations	Division of Cor The Centre of T	porations			

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&J MERC'S PAINTING SERVICES LLC		
(Name of the Limited Liability Compa (A i-lorida Limited I	ny as it now appears on our record Jability Company)	<u>5-</u>)
he Articles of Organization for this Limited Liability Company	were filed on $\frac{02/04/2023}{}$	and assigned
lorida document number 1.20000047932		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
ENIFER'S HANDY SERVICES L.L.C		
ne new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	913 CATALINA DR	
Principal office address MUST BE A STREET ADDRESS)	SANFORD, FLORIDA	2
	32771	2023
		A I
nter new mailing address, if applicable:	913 CATALINA DR	- c
Mailing address MAY BE A POST OFFICE BOX)	SANFORD, FLORIDA	
ranning uniform to the second	32771	<u> </u>
		2 2
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	3.\
	FI	lorida
	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

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>	Name	Address	Type of Action			
			□Remove			
			⊑Remove			
			□Change			
			□Add			
			TRemove			
			☐ Change			
			□Add			
			□Remove			
			□Change			
			□Add			
			□Change			
						

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary,) E. Effective date, if other than the date of filing: (optional)
(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) (optional) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the record is filed. $4;14~\mathrm{P.M}$ Dated 02 04 2023 adure of a member or authorized representative of a member JENIFER POLLY Typed or printed name of signee

. . . .