# L20000147057

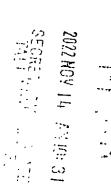
(Requestor's Name)
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(Business Entity Name)
(Document Number)
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# **COVER LETTER**

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	Registration Se Division of Cor				<b>.</b>
eup ir c		ndyman Services, LLC			
SUBJEC	.1:	Name of Lim	ited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		Jennifer Noga			
			Name of Person		
		Where You Matter Account	nting & Tax Prep, LLC		
			Firm/Company		
		PO Box 390005			20
		<del></del>	Address		
		Deltona, FL 32739-0005			OFFICE OF FEET OF STATE OF STA
			City/State and Zip Code		
		jnoga@wymaccounting.com	n to be used for future annual report notif	C	
For furth	er information c	concerning this matter, please c	-	ication)	3
Jennifer	Noga		386 575-4112		
	Name o	f Person		e Telephone Number	
Enclosed	is a check for the	he following amount:			
≣ \$25.0	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Certificate ( Certified Co (additional cop	of Status &
	Mailing Addres Registration S Division of C	Section	Street Address: Registration Sec Division of Cor		

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kortes Handyman Services, LLC			
( <u>Name of the Limite</u>	d Liability Compa A Florida Limited	any as it now appears on or Liability Company)	ır records.)
ne Articles of Organization for this Limited Lia	ability Company	were filed on May 29.	2020 and assigned
orida document number L20000147057	·		
nis amendment is submitted to amend the follo	wing:		
If amending name, enter the new name of	the limited liab	oility company here:	
7/A			
e new name must be distinguishable and contain the wo	ords "Limited Liabi	ility Company," the designat	ion "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applica	ıble:	N/A	. 27
rincipal office address MUST BE A STREE	TADDRESS)		1221 1-20 1-20
			三 三
nter new mailing address, if applicable:		N/A	
failing address MAY BE A POST OFFICE I	3 <i>OX</i> )		
	<del></del>		
. If amending the registered agent and/or re	•	address on our record	s, enter the name of the new reg
ent and/or the new registered office addres.	s here:		
Name of New Registered Agent:	Samantha J. Ko	опе	
New Registered Office Address:	3150 Telford L	.ane	
THE REGISTER OTHER ANDICES.	-	Enter Florida stre	et address
	Deltona		, Florida <u>32738</u>
		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>	<u>Name</u>	Address	Type of Action
AMBR	Samantha J. Korte	3150 Telford Lane	<b>≡</b> Add
		Deltona, FL 32738	□Remove
			Change
MGR	Cole Kone	3150 Telford Lane	□Add
		Deltona, FL 32738	□Remove
			<b>≡</b> Change
			2022 NOV
			☐Change 5
			□ Add
			Remove
			□ Change
<del></del>		_	□Add
			Remove
		<del></del>	□Change
			bb∧□
			□ Remove
			□ Change

Cole Korte Percen	tage is 20%					
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ective date, if other	than the date of filin	1ច:		(optio	nal)	
n effective date is listed.	the date must be specific and in this block does not	d cannot be prior to	o date of tiling or me	ore than 90 days after	filing.) Pursuant to 6	05.020
cument's effective dat	e on the Department of	State's records.	ore statutory ming	g requirements, tins	date will not be i	13160 1
	ed effective date, but no	ot an effective tin	ne, at 12:01 a.m. (	on the earlier of: (b)	The 90th day at	iter th
is filed.						
	October 28	2022				
ted	1 1		<del>_</del> ·			
/ /						

Filing Fee: \$25.00

Typed or printed name of signee

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kortes Handyman Services, LLC					
(Name of the Lim	ited Liability Com (A Florida Limite	ipany as it now appears on our d Liability Company)	records.)		
The Articles of Organization for this Limited I		ny were filed on May 29, 20	020	and assigne	ed
Florida document number L20000147057	·				
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited li	ability company here:			
N/A					
The new name must be distinguishable and contain the	words "Limited Lie	ability Company." the designation	n "LLC" or the abbrev	iation "L.L.C.	
Enter new principal offices address, if appli	cable:	N/A			
Principal office address MUST BE A STREA	ET ADDRESS)				
				<u> </u>	75
Enter new mailing address, if applicable:		N/A	<del></del> .	75. 15. 15. 15. 15. 15. 15. 15. 15. 15. 1	2022 HCV 1
Mailing address MAY BE A POST OFFICE	BOX)				
				·	<u></u> .
				e e	71 75
B. If amending the registered agent and/or agent and/or the new registered office addre	registered offic	e address on our records,	enter the name of		gistered
igent and of the new registered office additi	.ss nere.			rl	
Name of New Registered Agent:	Samantha J.	Korte			
New Registered Office Address:	3150 Teltoro	l Lane			
		Enter Florida street	address		
	Deltona		, 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

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<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Samantha J. Korte	3150 Telford Lane	■Add
		Deltona, FL 32738	□Remove
			Change
MGR	Cole Kone	3150 Telford Lane	
		Deltona, FL 32738	□ Remove
			■ Change
			202E/OV II
			☐Remove
			ြုံးမှု သို့ □Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
		<u> </u>	□Add
			□Remove
			□Change

 $(\mathbf{x}_{i}, \mathbf{x}_{i}, \mathbf{x$ 

7022 FOV     5 : 10: 31			Korte Percentage is 20%		
F 10V	fective date, if other than the date of filing:  In 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 605.02 one:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed				
F 10V 10: 31	fective date, if other than the date of filing:  In 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 605.02 one:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed				
FOV 16 5 100 2	fective date, if other than the date of filing:  In 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 605.02 one:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed				
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	fective date, if other than the date of filing:				<del></del>
	fective date, if other than the date of filing:  n 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 605.02 tte: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed			· · · · · · · · · · · · · · · · · · ·	
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	n 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 605.02 <u>ote:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed				
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	n 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 605.02 <u>ote:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed				
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 ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liste	culter 5 effective date on the Department of State 5 records.	an effect lote:   If	e date is listed, the date must be specific and cannot be prior to date of filing or r e date inserted in this block does not meet the applicable statutory fili	more than 90 days after filing.) Pursua	nt to 605 t be lista
			ecities a delayed effective date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th c	lay after th
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ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after t is filed.	is filed. October 28 2022	ited	1 -4 11		

Filing Fee: \$25.00