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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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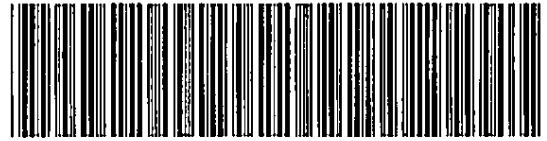
(Business Entity Name)

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A. BUTLER

DEC 21 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Blue Claw Handy Services, 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:

Timothy T. Riddle

Name of Person

Firm/Company

27504 Sugar Loaf Drive

Address

Wesley Chapel, Florida 33544

City/State and Zip Code

timandmarissa@verizon.net

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

For further information concerning this matter, please call:

Timothy T. Riddle

813

469-1986

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

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2020 RELEASE UNDER E.O. 14176

7/30/2020

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

[illegible]

[illegible]

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.

Dated September 18, 2022

Signature of a member or authorized representative of a member

Timothy T. Riddle

Typed or printed name of signee