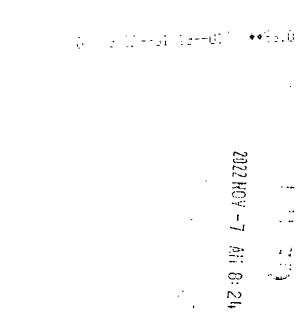
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COVER LETTER

TO:

TO: Amendment Section	Amendment Section		
Division of Corporations			
SUBJECT: My Handy Brad			
Name of Corporation			
DOCUMENT NUMBER: L20000265957			
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this	matter to the following:		
Brad Ekiss			
Name of Contact Person			
My Handy Brad			
Firm/Company	-		
414 Bahama Grande Blvd	201		
Address			
Apollo Beach, FL 33572	2022 ROV - 7		
City/State and Zip Code			
myhandybrad@gmail.com	_		
E-mail address: (to be used for future annual			
	ස		
For further information concerning this matter, p	please call:		
Brad Ekiss	at (813)525-2968		
Name of Contact Person	at (813)525-2968 Area Code & Daytime Telephone Number		
Enclosed is a \$35.00 check made payable to the	Department of State.		
Mailing Address: Amendment Section	Street Address: Amendment Section		
Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
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Tallahassee, FL 32303

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October 24, 2022

BRAD EKISS MY HANDY BRAD 414 BAHAMA GRANDE BLVD APOLLO BEACH, FL 33572

SUBJECT: MY HANDY BRAD LLC

Ref. Number: L20000265957

We have received your document for MY HANDY BRAD LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 622A00023858

Diane Cushing Senior Section Administrator

www.sunbiz.org

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	Name of the limited liability company: My Handy Brad LLC	
2. (a)	(a) 414 Bohama Grawa Blod (b) 414 Bahama Grawa Brincipal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE)	y company:
	Apollo Beach, FL 33572 Apollo Beach, F	L 3357
3.	Date of filing/registration in Florida L Z O O O Z L 59 S Document number	57
5. (a)	(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	:
(b)	St Patersburg FL 33707 . 1	
` '	Enter name of NEW Registered Agent and/or NEW Registered Office address: Y 14 Bahama Granda Blud NEW Registered Office Address:	
	No. 11- R 1 32577	
change agent v was/we	the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed ange or changes are made, the Florida street address of the registered office and the business office of the ent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the s/were authorized by an affirmative vote of the members of the limited liability company or as otherwise articles of organization or the operating agreement of the limited liability company.	registered change(s)
	rignature of a member Printed or typed name of signed	
I here provise the obj to mer	nereby accept the appointment as registered agent and agree to act in this capacity. I further agree to consistions of all statutes relative to the proper and complete performance of my duties, and I am familiar with obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document merely reflect a change in the registered office address, I hereby confirm that the limited liability compantified in writing of this change.	nply with the th and accept is being filed y has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

-Signature of Registered Agent