120000327422	
(Requestor's Name) (Address)	400381834284
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number)	02/25/2201010002 **35.00
Certified Copies Certificates of Status Special Instructions to Filing Officer: J. HORNE APR 18 2022	FILED 2022 APR 11 AM 9:50 SECRETARY OF STATE FALL AHASSEE, FLORE



RECEIVED 2022 APR 11 PM 12:33

SECHE TALLAHAUSSEE, FL

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 7, 2022

LESLEY GREENSLADE 25017 TURKEY LAKE ROAD HOWEY IN THE HILLS, FL 34737 US

SUBJECT: THE HANDY BUTLERS, LLC Ref. Number: L20000327422

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. 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.

Jasmine N Horne Regulatory Specialist II

Letter Number: 422A00005433

www.sunbiz.org

## COVER LETTER

TO: **Registration Section** Division of Corporations

The Handy Butlers Name of Limited Hability Company SUBJECT:

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lesley Greenslade The Handy Butlers Firm/Company 25017 Turky Lake Rd. Hovey in the Hills FL 34737 E-mail address: (1) be used for future annual report notification)

For further information concerning this matter, please call:

Lesley Greenslade at ( 407 ) 625-3746 Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

\$25 Filing Fee

in prior

\$55 Filing Fee & Certified Copy

## 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.

Handy Butlers Name of the limited liability company: 1. ester Greens 2.(a)(b) Principal office address of limited liability company: Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) Furkey LAKE Rd cest 34711 620000 327422 10-10-2020 Date of filing/registration in Florida Document number 3. 4. Den Dodal 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 875 W. OSCEDLA St Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 34711 Greenslad (b)14 9: Enter name of NEW Registered Agent and/or NEW Registered Office address; сл О urky Alle NEW Registered Office Address: FL 34737 If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. <u>Sley Greenslad</u> Printed or typed name of signee Signature of a member or authorized representative of a member 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 Lam 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.

Signature of Registered Agent

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