LZI 0000 73238

(Re	questor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



500364898595

U5/13/21--U1U21--U1U ★#3U.UU

2021 MAY 13 AM 7: 45

O SIMMONE
JUN 1 8 2021

COVER LETTER

TO:	Registration Se Division of Co		٠.	
CHDIC		IQUE HANDYMAN SERVIC	ES. LLC	
SUBJE	CI:	Name of Lin	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		TAMAR N HAMILTON	ESQUIRE	
			Name of Person	
		TAMAR N HAMILTON	PA .	
			Firm/Company	
		7401 WILES ROAD SUIT	E 228	
			Address	
		CORAL SPRINGS FLOR	IDA 33067	
			City/State and Zip Code	
		tamar@tamarhamiltoniaw.c	om to be used for future annual repor	t notification)
For furth	her information c	concerning this matter, please c		, nonneadon
TAMAI	R HAMILTON		954 507-47; at ()	
	Name o	of Person	Area Code D	aytime Telephone Number
Enclosed	d is a check for t	he 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	Street Addre Registration	n Section
	Division of C P.O. Box 632			Corporations of Tallahassee
	Tallahassee,			onroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021HAY 13 AH 7: 45

A & L UNIQUE HANDYMAN SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on $\frac{02/11/2}{2}$	2021	and assigned
Florida document number L21000073238			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	pility company here:		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the design	nation "LLC" or the abbrev	iation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	-		
(Mailing address MAY BE A POST OFFICE BOX)	· 		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our reco	rds, <u>enter the name of</u>	the new registered
New Registered Office Address:	Enter Florida ;		
	City	, Florida 2	Lip Code
New Registered Agent's Signature, if changing Registered Agent	<u>!</u>		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my provided for in Cha _l	duties, and Lam fami pter 605, F.S. Or, if th	liar with and his document is
If Cha	nging Registered Agent.	Signature of New Register	red 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 2024 HAY 13 AFI	7: 45Type of Action
MGR	LAVESA BLACKWOOD	16531 NW 18 PLACE .	∵ □Add
		OPA LOCKA, FLORIDA 33054	■Remove
			□ Change
			□ Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□ Add
			□Remove

ank you.	
	دے
	ب
	
· · · · · · · · · · · · · · · · · · ·	
	
e date, if other than the date of filing: ive date is listed, the date must be specific and cannot be prior to date of filing or more that the date inserted in this block does not meet the applicable statutory filing requ t's effective date on the Department of State's records.	(optional) in 90 days after filing.) Pursuant to 605.02 direments, this date will not be listed a
specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the	earlier of: (b) The 90th day after th
2021	
A-Black woed Signature of a member or authorized representative of a m	nember

Filing Fee: \$25.00