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COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: 34 DE OR HANDY 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:
Yania Mana Perlz Name of Person D3Y Decir Handy Firm/Company 3418 South Foth Street Address Tampa IL 33619 City/State and Zip Code Yania de mo 23 a 2 9 mail (2000)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (8/3) F04-8976 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee & S30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- U24 Devor Handy 6/		
(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 MAYON 15Th Florida document number 12 100120495.	and as	ssigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the ab	breviation "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)		
3. If amending the registered agent and/or registered office address on our records, enter the nam	a a c aba	
egent and/or the new registered office address here:	e or the ne	w registered
Name of New Registered Agent:	- <u></u>	<u></u>
New Registered Office Address:		es .
Enter Florida street address	2021	
	<u></u>	
City Sew Registered Agent's Signature, if changing Registered Agent:	Alp Code	
	>	, 17
hereby accept the appointment as registered agent and agree to act in this capacity. I further agree rovisions of all statutes relative to the proper and complete performance of my duties, and I am faccept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, leading filed to merely reflect a change in the registered office address, I hereby confirm that the lim	a milia r wii if t his docu	th and ument is
ompany 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
MGR	Yania D. Mena Pirez	3418 South Foth St any FL 33619	De Fradd
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Effective date, if othe	r than the date of G	D:				
f an effective date is listed.	the date must be specific	and cannot be prior to	date of filing or more th	(options an 90 days after fili	na i Duecuant	to 605.0207
Note: If the date inserted ocument's effective date.	ite on the Department	of Meet the applicab of State's records.	le statutory filing req	uirements, this da	ate will not b	_
					2021	Ø
e record specifies a dela d is filed.	yed effective date, but	not an effective time	e, at 12:01 a.m. on the	e earlier of: (b)	The 90th day	after the
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Dated ARIL	am	2021		•	ςı	77
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·	Signature o	a member or authoris	zed representative of a n	·-	<u> </u>	_