## 121000123494

Office Use Only



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2021 JUL 21 PH 3: 17
SECRETARY OF STATE
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## **COVER LETTER**

Tallahassee, FL 32314

	Registration S Division of Co							
C11D 1177	Hole in O	Hole in One HandyMan Service LLC						
SUBJEC	.1;	Name of Lim	ited Liability Company					
The encl	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.					
Please re	turn all corresp	ondence concerning this matter	to the following:					
		Ashton Lewis						
			Name of Person					
		Hole In One Handyman Se	ervice LLC					
		<del></del>	Firm/Company	<del></del>				
		108 Sun lane						
			Address					
		- Panama City Beach Fl 32413						
			City/State and Zip Code	<u> </u>				
		holeinonehandyman@gmai						
For furth	ier information	eoneerning this matter, please e	to be used for future annual report no all:	, ,				
Ashton Lewis			850 258-2562					
	Name	of Person	at () Area Code Dayti	me Telephone Number				
Enclosed	l is a check for	the following amount:						
<b>■</b> \$25.	00 Filing Fec	☐ \$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 Addre		Street Address: Registration S	Section				
	Division of	Corporations	Division of Co	orporations				
	P.O. Box 63	27	The Centre of	Tallahassee				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hole In One Handyman Service 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  $\frac{03/16/2021}{1}$ and assigned Florida document number 1.21000123494 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 abbreviation "LLC." 108 SAN LAND 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address New Registered Agent's Signature, if changing Registered Agent: 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 I am 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.

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>	<u>Address</u>	Type of Action
MGR	Ashton Lewis	108 Sun lane Panama City Beach FL 32413	
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ffective date, if other than the an effective date is listed, the date mustote: If the date inserted in this blocument's effective date on the D	t be specific and cannot be prior to date ock does not meet the applicable s	of filing or more than 90 days aft	tional) er filing.) Pursa nis date will n	uant to 605,0207 ( not be listed as (
record specifies a delayed effectiv f is filed.	e date, but not an effective time, at	12:01 a.m. on the earlier of:	(b) The 90th	n day after the
ated	2021			
1,	<u></u>	representative of a member		

Filing Fee: \$25.00