## h21000225399

(Re	questor's Name)	•
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	
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## COVER LETTER

10:	Registration Se Division of Cor			***
		vid Handyman Service:	S LLC	
SUBJE	CCT:			
		Name of Lin	nited Liability Company	
The end	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		ReyDavid De Luna	Gonzalez	
		<del></del>	Name of Person	
		King David Handym	an Services LLC	
			Firm/Company	P&11/
		1213 NW 6th ave		
			Address	
		Fort lauderdale		
			City/State and Zip Code	<del></del>
		E-mail address: (	to be used for future annual report r	notification)
For furt	her information c	oncerning this matter, please c	all:	
ReyDa	vid De Lun	a Gonzalez	954 882421	7
	Name o	f Person	at () Area Code Day	time Telephone Number
Enclose	ed is a check for th	ne following amount:		
<b>⊠</b> \$25	5.00 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
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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

King David Handyman Services LLC

(Name of the Limi	ted Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited L Florida document number L21000225399	iability Company were filed on	14/2021 and assigned
This amendment is submitted to amend the foli	owing:	
A. If amending name, enter the new name of King David Contractor LLC	of the limited liability company here	<u>e</u> :
The new name must be distinguishable and contain the	words "Limited Liability Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applie		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE		
B. If amending the registered agent and/or agent and/or the new registered office addre	S/	ords, enter the name of the new regis
Name of New Registered Agent:	Reydavid De Luna Gonzale	
New Registered Office Address:	1213 NW 6th Ave	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
· · · · · ·		a street address
	fort lauderdale	, Florida
New Registered Agent's Signature, if changing	City Registered Agent:	Zip Code

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with 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.

> Peydavid De Luna Gonzalez If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Actio
AMBR	Reydavid De Luna Gonzalez	1213 NW 6th Ave	□Add
<del></del>		Fort Lauderdale FL 33311	U Aud
			□Remove
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	08/01/2021
fective date, if other than to meffective date is listed, the date of	he date of filing: (optional) nust be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0
ote: If the date inscrted in this	block does not meet the applicable statutory filing requirements, this date will not be listed
cument's effective date on the	Department of State's records.
ecord specifies a delayed effec is filed.	tive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
August 21	2021
ted	DocuSigned by:
	Peydavid De Luna Gonzalez
	Signature of a member or authorized representative of a member
,	
Reydavid De Lu	na Gonzalez
	Typed or printed name of signee

Filing Fee: \$25.00