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Phone : (786)307-2733

Fax Number : (954)420-7118

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN AG HANDY SOLUTIONS LLC

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K. SALY

DEC - 4 2023

COVER LETTER

	ion Section of Corporations						
AG H	IANDY SOLUTIONS LLC						
Name of Limited Liability Company							
The enclosed Artic	les of Amendment and fee(s) are submitted for filing.						
Please return all co	rrespondence concerning this matter to the following:						
	ANWAR I PUELLO						
	Name of Person						
	TAX S PRO CORP						
	Firm/Company						
	8030 PINES BLVD						
	Address						
	PEMBROKE PINES , FL 33024						
	City/State and Zip Code						
	INFO@TAXSPRO.COM						
	E-mail address: (to be used for future annual report notification)						
For further informa	tion concerning this matter, please call:						
ANWAR PUELLO	700 5012755						
N	ame of Person Area Code Daytime Telephone Number						
Enclosed is a check	for the following amount:						
■ \$25.00 Filing F	Tee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)						

Malling Address: Registration Section Division of Corporations

P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tailahassee AG HANDY SOLUTIONS LLC

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
UFC
TALLAHASSEE FLORIDE
SEE FLORID.

(Name of the Limited Liability Comp. (A Florida Limited	iany 25 lt now somests on our records.) (Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L21000466766	y were filed on 10/27/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	2000 S OCEAN DRIVE
(Principal office address MUST BE A STREET ADDRESS)	FRONT D
	HALLANDALE BEACH, FL 33009
Enter new mailing address, if applicable:	2000 S OCEAN DRIVE
(Mailing address MAY BE A POST OFFICE BOX)	FRONT D
	HALLANDALE BEACH, FL 33009
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code

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 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
DIR	guzman rubiano, alejandro	200 s ocean drive, front d,	□ Add
		hallandale beach, fl 33009	■ Remove
			Change
AMBR	Guzman Rubiano, Alejandro	2000 s ocean drive, Front D	= Add
		hallandale beach, Fl 33009	□Remove
			Change
			□Remove
			TATE DAME
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Effective date, if other than a fan effective date is listed, the date Note: If the date inserted in this document's effective date on the	must be specific and cannot be prior to date of filing or more to block does not meet the applicable statutory filing re-	(optional) than 90 days after filing.) Pursuant to 605.0207 (3 quirements, this date will not be listed as the
record specifies a delayed effect d is filed.	tive date, but not an effective time, at 12:01 a.m. on the	he earlier of: (b) The 90th day after the
G 12 1110Q.		
12/01 Dated		
12/01 Dated	Signature of a member or authorized representative of a	