La1 ccc478276

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COVER LETTER

TO:	Registration So Division of Co			
a		S&Y Hand	lyman Service LLC	
SUBJE	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Willians Ortega Hernander		
			Name of Person	
		S&Y Handyman Service I.	LC	
			Firm/Company	
		7985 Preserve Cir, Apt 113	35	
			Address	
		Naples, FL, 34119		
			City/State and Zip Code	
		syhandymanserv@gmail.co	m to be used for future annual report noti	(fantis)
г.с.	ali l'Essandian			meanony
ror iur		concerning this matter, please c		
Willians Ortega Hernandez			-331-6509	
	Name o	of Person	Area Code Daytim	ne Telephone Number
Enclos	ed is a check for t	he following amount:		
□ \$2	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 Division of C P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	rporations Fallahassee be Street, Suite 810

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

	/ Handyman Service LLC		
(<u>Name of the Limited Liab</u> (A Flor	ility Company as it now appears da Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	11/04/2021	and assigned
Florida document numberL21000478276			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company her	<u>re</u> :	
S&Y Installations LLC			
The new name must be distinguishable and contain the words "L	imited Liability Company," the de	esignation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:			
zane, new humanhar annes and assign approximation	 -		
Principal office address MUST RF 4 STREET ADI	(223AC		
Principal office address MUST BE A STREET ADI	ORESS)		
<u>Principal office address MUST BE A STREET ADI</u>	ORESS)		
	<u> </u>		
	<u> </u>		
Enter new mailing address, if applicable:	ORESS)		
Enter new mailing address, if applicable:	ORESS)		
Principal office address MUST BE A STREET ADI Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ORESS)		202 5.5
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register	ed office address on our re	ecords, enter the nar	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register	ed office address on our re	ecords, <u>enter the nar</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register	ed office address on our re	ecords, <u>enter the nar</u>	ne of the new regist
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Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register agent and/or the new registered office address here	ed office address on our re		ne of the new regist
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register agent and/or the new registered office address here Name of New Registered Agent:	ed office address on our re	ecords, <u>enter the nar</u> da street address	ne of the new regist
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or register agent and/or the new registered office address here Name of New Registered Agent:	ed office address on our re		ne of the new regist

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>	Name	Address	Type of Action
			□ Remove
			Change
			□Add
			□Remove
			☐ Change
·			\ _Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□Add
			□Remove
			□Change

). If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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Note: If the	te, if other than the date of filing:
the record spectord is filed.	rifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	05/07/2023
-	Signature of a member or authorized ryph sentative of a member
	Williams Ortega Hernandez
_	Typed or printed name of signee

Filing Fee: \$25.00