L21000499928

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: My Guy The Handyman L.L.C. 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:	
ERIC YEITER Name of Person	
Name of Person	
Firm/Company	
6415 CUTLER TER.	
PORT CHARLUTTE, FL 33981 City/State and Zip Code	
Ceyil Cog S3Chagmail Com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
TRIC VEITER at (941) 456-6338 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Section Street Address: Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

My Guy The Handy	Company as it now appears on amited Liability Company)	our records.)
(A Florida I	imited Liability Company)	,
The Articles of Organization for this Limited Liability Co Florida document number <u>L21000499928</u>	mpany were filed on $\frac{1/8}{}$	/2024 and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limit</u>	ed liability company here:	
EFARS CONSTRUCTION L The new name must be distinguishable and contain the words "Limite	L.C. ed Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	<u> </u>	
Enter new mailing address, if applicable:	***************************************	
(Mailing address MAY BE A POST OFFICE BOX)		·
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our recor	ds, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Euro 12 - 1	
	Enter Florida si	reet address
	City	, Florida
	c uy	zip coae

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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□∧dd
			□Remove
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□ Add
			□Remove
			□Change

D. II am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
(If an ef Note:	ive date, if other than the date of filing:
f the reco ecord is fi	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
Dated	January 8, 2024
	Signature of a member or authorized representative of a member
	Typed or printed name of signee