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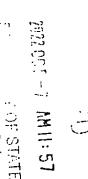
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Certified Copies Certificates of Status
Consideration to Siling Officer
Special Instructions to Filing Officer:

Office Use Only



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A. RIVERS

DEC 28 2024

## **COVER LETTER**

TO:		ation Secti n of Corpo				*
SUBJE	` СТ:	WElls	Un limited Name of Limi	Realty LL ted Liability Company	<u></u>	<del></del>
The end	losed Ar	ticles of Ar	nendment and fee(s) are subr	nitted for filing.		
Please 1	eturn all	correspond	ence concerning this matter t	o the following:		
			ANTHONY	WEILS Name of Person		
			Wells Unl	IMITED K	ealty	<del></del>
			2808 41st	Are NORTH Address		
			St. Peters be	City/State and Zip Cod	3714 le	
			Whad paget (g	o be used for future annu	al report notification)	<u>_</u>
For fur	ther infor	mation con	cerning this matter, please ca	ill:		
	N THON	Name of F	/ <u>E // S</u> crson	at (727) Arca Code	303 - 820 Daytime Telepho	one Number
Enclos	ed is a ch	eck for the	following amount:			
□ \$2	5.00 Filir	ng Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fe Certified Copy (additional copy is a		\$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

WELLS UNI	MITED KEALTY LLC	
(Name of the Limited	d Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
he Articles of Organization for this Limited Lia lorida document number $\frac{L}{22000}$	bility Company were filed on	and assigned
his amendment is submitted to amend the follow		
NEILS UNLIMITED Rea	the limited liability company here:  Ity & Handyman LLC  rds "Limited Liability Company," the designation "LLC" or the	obbonistion W. I. C.
		abbreviation E.E.C.
nter new principal offices address, if applical		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE B	<u></u>	
gent and/or the new registered office address	gistered office address on our records, enter the na here:	me of the new registe
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		- :
	Enter Florida street address, Florida	OF S. E. O
	City	S. 714 F.

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
MGR	ANTHONY WElls	2808 415T Are NURTH	<u>'</u> ÆÎ∧dd
		2808 41ST Are NORTH St. Petersburg, FL	□Remove
		33 714	
			🗀 Add
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Effectiv	re date, if other than the date of filing: (optional)
fan effec Note:	ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
locume	nt's effective date on the Department of State's records.
record	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
<b>d</b> is file	d.
	Antique 5 2022
)ated _	OCTOBER 5 2022
	Rebence Haughand Signature of a member organized representative of a member
	years Hangianal
	Signature of a member or authorized representative of a member
	Rebecca Haugland  Typed or printed name of signee