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☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

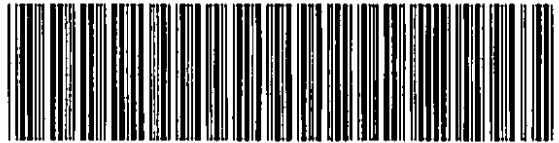
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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

NO Sig

Office Use Only



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2022 DEC 13 PM 3:00

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2022

WILFRED JOSEPH
1841 NORTHGLEN CIR
MIDDLEBURG, FL 32068

SUBJECT: WIL-FRED HANDYMAN & CLEANING SERVICES, LLC
Ref. Number: L22000042893

We have received your document for WIL-FRED HANDYMAN & CLEANING SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

TERARRA A SIMMONS
OPS

Letter Number: 422A00006251

2022 DEC 13 PM 3:00

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 4, 2022

WILFRED JOSEPH
1841 NORTHGLEN CIR
MIDDLEBURG, FL 32068

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SUBJECT: WIL-FRED HANDYMAN & CLEANING SERVICES, LLC
Ref. Number: L22000042893

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Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 422A00006251

2022 DEC 13 PM 3:00

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WIL-FRED HANDYMAN & CLEANING SERVICES, LLC
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:

Wilfred Joseph

Name of Person

WIL-FRED HANDYMAN & CLEANING SERVICES, LLC

Firm/Company

1841 NORTHGLEN CIR

Address

MIDDLEBURG, FL 32068

City/State and Zip Code

wilfredhelpinghands@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wilfred Joseph

904

993-4995

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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

2022 DEC 13 PM 3:00

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

WIL-FRED HANDYMAN & CLEANING SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 01/24/2022 and assigned
Florida document number L22000042893.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

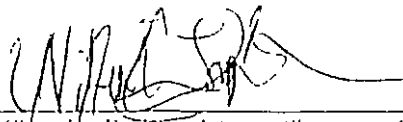
Name of New Registered Agent: Wilfred Joseph

New Registered Office Address: 1841 NORTHGLEN CIR
Enter Florida street address

MIDDLEBURG, Florida 32068
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 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>	<u>Address</u>	<u>Type of Action</u>
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AMBR	Jana Jasmin	3858 Pebble Brooke Circle	<input type="checkbox"/> Add
		Orange Park, FL 32065	<input checked="" type="checkbox"/> Remove

MGR	Wilfred Joseph	1841 Northgen Cir	<input checked="" type="checkbox"/> Add
		Middleburg, FL 32068	<input type="checkbox"/> Remove

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(If an effective 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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the 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 record is filed.

Joined

5-4-22

[Handwritten signature]

Signature of a member or authorized representative of a member

Wilfred Joseph

typed or printed name of signee

Filing Fee: \$25.00

1991 1992 625.00