

h22000080216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

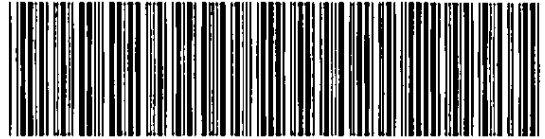
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/20/22--01008--015 **25.00

FILED
2022 APR 20 AM 8:02
CLERK OF DISTRICT COURT
TALLAHASSEE FL

ef

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Full Force Sanitorial 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:

Cagney Watson

Name of Person

Full Force Sanitorial LLC

Firm/Company

19046 Bruce B. Downs Suite BG #751

Address

Tampa FLA 33647

City/State and Zip Code

Full Force LLC@icloud.com

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

For further information concerning this matter, please call:

Cagney Watson

Name of Person

at (727)

Area Code

200-7456

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

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

FILED

2022 APR 20 AM 8:02

Full Fource Janitorial LLC

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

STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 2/18/22 and assigned
Florida document number L22000080216.

This amendment is submitted to amend the following:

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

Full Fource Handyman and Janitorial LLC

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:

19046 Bruce B Downs Suite BG #791

(Principal office address MUST BE A STREET ADDRESS)

Tampa Florida 33647

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:

Caryn Watson

New Registered Office Address:

19046 Bruce B Downs Suite BG #791

Enter Florida street address

Tampa

City

Florida

33647

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.

Caryn Watson

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> |
|--------------|----------------------|----------------------------------|--|
| <u>MGR</u> | <u>Cagney Watson</u> | <u>19046 Bruce B Downs Suite</u> | <input checked="" type="checkbox"/> Add |
| | | <u>Box # 791 Tampa FL 33647</u> | <input type="checkbox"/> Remove |
| | | <u>33647</u> | <input type="checkbox"/> Change |
| <u>Ap</u> | <u>Cagney Watson</u> | <u>19046 Bruce B Downs Suite</u> | <input type="checkbox"/> Add |
| | | <u>Box # 791 Tampa FL 33647</u> | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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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)

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.

Dated 11/18/22, 2022


Signature of a member of _____

Signature of a member or authorized representative of a member

Cagney Watson
Typed or printed name

Typed or printed name of signee