## L22000169881

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·
J. HORNE
SEP - 1 2023
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## **COVER LETTER**

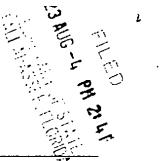
	Registration Se Division of Cor					
SUBJEC	·—	h Handyman Solutions LLC				
SUBJEC	Name of Limited Liability Company					
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		Stephanie Goebel				
			Name of Person	<del>,</del>		
		ZenBusiness Inc.				
		<del> </del>	Firm/Company			
		5511 Parkerest Drive, Ste.	103			
			Address	· · · · · · · · · · · · · · · · · · ·		
		Austin, TX 78731				
		fulfillment@zenbusiness.cc	City/State and Zip Code			
			to be used for future annual report notif	ication)		
For furth	er information c	oncerning this matter, please ca				
Stephani	e Goebel c/o <b>Z</b> e	nBusiness Inc.	844 493-6249 at ( )			
	Name o	f Person		Telephone Number		
Enclosed	is a check for th	ne following amount:				
\$25.0	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)		
	MAII.	ING ADDRESS:	STREET/COURI	ER ADDRESS:		

TO:

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

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Palm Beach Handyman Solutions 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 <u>04/08/2022</u>	and assigned
Florida document number L22000169881		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company." the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6944 Beacon Hollow Turn	
(Principal office address MUST BE A STREET ADDRESS)	Boynton Beach, FL 33437-2843	
Enter new mailing address, if applicable:	6944 Beacon Hollow Turn	
(Mailing address MAY BE A POST OFFICE BOX)	Boynton Beach, FL 33437-2843	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		r the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida _	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	<u> </u>	

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 adde or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<b>Type of Action</b>
AMBR	Nicholas Price		Add
			□ Remove
		6944 Beacon Hollow Turn Boynton Beach, FL 33437-2843	E Change
<del></del>			Add
		<del></del>	□ Remove
		<del></del>	Change
<del></del>			Add
			□ Remove
		<del> </del>	Change
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			Remove
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,	y other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	<del></del>
Note: If the da	f other than the date of filing:
	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: y after the record is filed.
Dated July 24	2023
	cholas Price
<del></del>	Signature of a member or authorized representative of a member
Nic	olas Price
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00