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(Reque	estor's Name)	
(Addre	ss)	
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(City/Si	tate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busine	ess Entity Nar	ne)
(Docum	nent Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filir	ng Officer:	

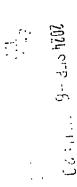




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COVER LETTER

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TO: Registration Section

Division of Corp	orations			
SUBJECT: THE	ny's Handy	nan Services Lited Liability Company	LC	
	mendment and fee(s) are sub	<u>-</u>		
r lease return an correspon	dence concerning this matter	to the following:		
	Stephen M	leade Neuell Name of Person		
	Tiffanys H	andyman Serv	ices LLC	
	1726 Hill	top BNA. Address		
	Jacksonvi'	City/State and Zip Code		
	E-mail address: (to be used for future annual report notif	ication)	
For further information cor	ncerning this matter, please ca	all;		
Station M Name of 1	Novell	at (974) 229 - Daytime	- 6985 : Telephone Number	
Enclosed is a check for the	following amount:			
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed	
				50?i.
Mailing Address:		Street Address:	•	.)
Registration Se		Registration Sec		ì
Division of Co P.O. Box 6327	•	Division of Cor The Centre of T		٠,
Tallahassee, Fl			Street, Suite 810	7

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(8)	wida iziiiiicu izi	iomicy Company)		
The Articles of Organization for this Limited Liabil Florida document number <u>L220003</u>	ity Company v 129 29	vere filed on 🖰	03 2024	and assigned
This amendment is submitted to amend the following				
A. If amending name, enter the new name of the	_	ity company here:		
The new name must be distinguishable and contain the words	"Limited Liabilit	y Company," the design	nation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable	<u>:</u>			
(Principal office address MUST BE A STREET A				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO)	<u>Y)</u>			
B. If amending the registered agent and/or regis agent and/or the new registered office address he Name of New Registered Agent:		ldress on our reco	ds, <u>enter the nan</u>	ne of the new registered
New Registered Office Address:				
		Enter Florida s	treet address	
_			, Florida	
		City		Zip Code
New Registered Agent's Signature, if changing Regis				2024
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regicompany has been notified in writing of this characters.	nd complete p ed agent as pr stered office a	erformance of my ovided for in Chap	duties, and I am joter 605, F.S. Or	familiar with and *, if this document is

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>	Type of Action
AMBR	Biobert Rodden	148 Avuba Lane	(EAdd
		Pontevedra Bun, Fu 3208	Remove 2
			□Change
AMBR	Joshua Armstrong	8386 1035 St. 104 29	_ Dadd
		Jax, FL 32210	□Remove
		·	□Change
AMBR	Michael Smith	8344 Olden Ave	(Ly/qq
		Jacksonville, FL32216	□Remove
			□Change
			□Add
			□Remove
			□Change
			Add C 200 C Remove :
		· · · · · · · · · · · · · · · · · · ·	
			∴ □Change :
			ً DAdd
			□Remove
			□Change

Just adding 3 people to the	LLC	
Sust adding 3 people to the every thing else stays the same.		
J		
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ective date, if other than the date of filing: 09 103 2029	_ (optional)	
effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 date: If the date inserted in this block does not meet the applicable statutory filing requirements		
ument's effective date on the Department of State's records.		
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie	er of the The Ooth door	بطع سدولاء
s filed.	ror, (o) - the som day a	mer m
Salan 26 200.1		
ed Soptember 3rd. 2024.	202	
Fil X II	2024 67	
Signature of abnomber or authorized representative of a member	ر. : دن	-
Stanna March Namoll	. ,	
Stephen Mede Newell Typed or printed name of signee	<u> </u>	-