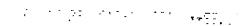
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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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A. RIVERS

JUN - 3 2023

COVER LETTER

TO:	Registration Se Division of Co					
our ic		DOCKS & LIFTS LLC				
SUBJE	CI:	T:Name of Limited Liability Company				
The enc	losed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please r	eturn all correspo	ondence concerning this matter	to the following:			
		Cheyenne Moseley				
			Name of Person	· · · · · · · · · · · · · · · · · · ·		
		Legalzoom.com, Inc.				
			Firm/Company			
		101 N Brand Blvd 11th Fl				
			Address			
		Glendale, CA 91203				
			City/State and Zip Code			
		Outlawdocks@gmail.com				
		E-mail address: (t	o be used for future annual report notifi	cation)		
For furt	her information o	concerning this matter, please ca	all:			
Cheyen	ne Moseley		800 773-0888 at ()			
	Name o	of Person	Area Code Daytime	Telephone Number		
Enclose	d is a check for t	he 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)		

TO:

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OUTLAW DOCKS & LIFTS 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 _____ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Z's Handyman Services 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: (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: New Registered Office Address: Enter Florida street address , Florida

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.

New Registered Agent's Signature, if changing Registered Agent:

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		
			D Add		
			□ Remove		
					
			□ Add		
			☐ Remove		
			☐ Change		
			Add		
			Remove		
			Change		
			Add		
			□ Remove		
			☐ Change		
			Remove		
			Change		
			D Add		
			□ Remove		

☐ Change

D. II amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
_	
	<u> </u>
_	
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_	
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_	
F Effectiv	ve date, if other than the date of filing: (optional)
(If an effe <u>Note:</u> I	the 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 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	ord specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of 90th day after the record is filed.
Dated _	
	3/1/2 20 Al
	Signature of a member or authorized representative of a member
	Blake Zrust

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

COVER LETTER

Divi	sion of Corpo	orations			
SUBJECT:		OOCKS & LIFTS LLC			
SOBJECT.		Name of Limit	ted Liability Company		
The enclosed	Articles of A	mendment and fee(s) are subm	nitted for filing.		
Please return	all correspond	dence concerning this matter t	o the following:		
		Cheyenne Moseley			
			Name of Person		
		Legalzoom.com, Inc.			
Firm/Company					
101 N Brand Blvd 11th Fl					
			Address		
		Glendale, CA 91203			
City/State and Zip Code					
		Outlawdocks@gmail.com			
		E-mail address: (to	o be used for future annual repor	t notification)	
For further in	formation con	cerning this matter, please ca	11:		
Cheyenne M	oseley		800 773-08		
	Name of F	Person	Area Code D	aytime Telephone Number	
Enclosed is a	check for the	following amount:			
□ \$25.00 Fi	iling 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)	

TO:

Registration Section

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301