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(Requestor's Name)	
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(Business Entity Name)	
(Business Entry Name)	
(Document Number)	
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2022 NOV -7 MITH 26 SECRETARY OF STATE



## **COVER LETTER**

TO: Registration Division of C			
	MAN COMPLETE SERVICES.	LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Jose Nelson Caicedo		
		Name of Person	
	Handyman Complete Serv	rices, LLC	
		Firm/Company	
	100 ALVA CIRCLE AP	Т 1428	
	· · · -	Address	2027 SEI
	DAYTONA, FL 32117		2022 NOV -7 SECNETAR STALLAR
		City/State and Zip Code	
	jnelca@hotmail.com		(A)
For further information	E-mail address: ( n concerning this matter, please c	to be used for future annual report not all:	
Jose Nelson Caicedo		678 887-8940 at ( )	יים ו <sub>יידן</sub> סי
Nam	e of Person		ne Telephone Number
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee.</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>
Mailing Add		<u>Street Address:</u> Registration Sc	ection
Registratio Division of	n Section *Corporations	Division of Co	
P.O. Box 6	327	The Centre of	Fallahassee
Tallahassec	e, FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HANDYMAN COMPLETE 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  $\frac{10/17/2022}{10/17/2022}$ and assigned Florida document number  $\frac{L22000444621}{L}$ 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 "LLC." 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

## 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.

City

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
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NESTOR A GONZALEZ	NEW ADDRESS: : 3235 Park Branch Ave. Clermont, FL 34711			
	REMOVE: 11236 S ORANGE BLOSSOM TRL. ORLANDO, FL 32837			
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fective date is listed, the date m If the date inserted in this b	st be specific and cannot be prior to date of filing or more than 90 days after filin lock does not meet the applicable statutory filing requirements, this dat	g.) Pursuant to e will not be	> 605. : Tiste	
ent's effective date on the l	Department of State's records.			
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d specifies a delayed effecti led.	we date, but not an effective time, at 12:01 a.m. on the earlier of: (b) T	he 90th day	after	
	2002			
OCTOBER 31	. 2022			
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	Signature of a member or authorized representative of a member		_	