## L23000008984

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## **COVER LETTER**

Division of Cor				
SUBJECT:	Panhandle Paradise,	Handyman Service	es LLC	
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
		Nathan Brenner		
	<del></del>	Name of Person		
		Firm/Company		
		4034 Indian Trail		
		Address		
	<u>D</u>	estin, Florida 3254 City/State and Zip Code	1	<del></del>
	Panhand	lleParadiseHandyman@gm	ail.com	
		to be used for future annual re		<del></del>
For further information of	concerning this matter, please co	all:		
Nati	nan Brenner	at ( <u>858</u> )	524-4326	
Name (	of Person	Area Code	Daytime Telepho	one Number
Enclosed 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 enclo		\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclose

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Future In	itegrity LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)	<del></del>
(A rionda Emineu i	4	
The Articles of Organization for this Limited Liability Company	were filed on01/9/2/2023	and assigned
Florida document number <u>L2300008984</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Panhandle Paradise, Handym	an Services LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the a	bbreviggon "L.L.C,"
Enter new principal offices address, if applicable:	1992 Lewis Turner	ω ,
(Principal office address MUST BE A STREET ADDRESS)	Blvd	70 (mm) 20 (mm)
	Fort Walton Beach,	iii.
	Florida 32547	The or
Enter new mailing address, if applicable:	4034 Indian Trail	m: 2
(Mailing address MAY BE A POST OFFICE BOX)	Destin, Florida	<u> </u>
	32541	<u> </u>
B. If amending the registered agent and/or registered office a	nddress on our records, enter the nar	ne of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		11.00
New Registered Office Address:		
	Enter Florida street address	
	, Florida _	
	City	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.

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>	Address	Type of Action
			□Add
			⊡Remove
			□ Change
			□Remove
			□Change
		···	□Remove
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an effective date is ote: If the date i	f other than the date of listed, the date must be spe inserted in this block do live date on the Department	cific and cannot be p es not meet the ap	plicable statutory filin	option (option ore than 90 days after grequirements, this	filing.) Pursuant to 605.020
ecord specifies a is filed.	a delayed effective date,	but not an effectiv	ve time, at 12:01 a.m.	on the earlier of: (b	) The 90th day after the
ated	April 24th	- , _202 - /h	u Sc	ennur	
	Signati	ire of a member or a	authorized representative	of a member	· <del></del>