L23 000 246 442

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200430787142

06/04/24--01009--001 **25.00



COVER LETTER

TO:	Registration Se Division of Cor		•	•
SUBJE		DYMAN SERVICES LLC		
SOBJEN		Name of Lin	nited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
			Name of Person	
		CRN Management Inc		
			Firm/Company	
		4054 sw 50th St		
			Address	
		Fort Lauderdale, FL 3331-	1	
		····	City/State and Zip Code	
		crnmanagementinc@gmail.		
For furth	ner information c	E-mail address: { oncerning this matter, please c	to be used for future annual report nall:	otification)
Rivka C	ohen		347 662-8222	
	Name o	f Person		time Telephone Number
Enclosed	l is a check for tl	ne following amount:		
≡ \$25.	00 Filing Fee	S30.00 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)
	Mailing Addres Registration 5		Street Address:	
	Division of C	orporations	Registration S Division of C	
	P.O. Box 632 Tallahassee, I		The Centre of 2415 N. Mon	f Tallahassee roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records. Liability Company))
he Articles of Organization for this Limited Liability Company lorida document number <u>L23000246442</u> .	were filed on 05/19/2023	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	oility company here:	
C Garage Doors LLC		
ne new name must be distinguishable and contain the words "Limited Liabi	ility Company." the designation "LLC"	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		:- 2
		7
nter new mailing address, if applicable:	1325 Beacon Village Dr	
Nailing address MAY BE A POST OFFICE BOX)	Raleigh, NC 27604	
<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		= - 3
If amending the registered agent and/or registered office ent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter Florida street address	
	, Flor	
	City	Zip Code

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

LC F HANDYMAN SERVICES LLC

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 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
			□Change
			□Add
			□Remove
			□Change
		<u></u>	□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change

				·-
				
fective date, if other than in effective date is listed, the date ote: If the date inserted in the cument's effective date on the	e must be specific and cannot is block does not meet th	e applicable statutory		ling.) Pursuant to 605.0207 (
ecord specifies a delayed effi is filed.	ective date, but not an eff	ective time, at 12:01 a	.m. on the earlier of: (b)	The 90th day after the
ited May 28th		4		
			ative of a member	

Filing Fee: \$25.00