## L23000320163

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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: VIERA HANDYMAN SERVICE LLC  Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
KENNETH WILBRANDT JA
KENNETH WILBRANDT JR
VIERA HANDYMAN SERVICE LLC Firm/Company
Firm/Company
1267 HEVILA ST N.W.
PALM BAY FL 32907  City/State and Zip Code  KENNETH WIL BRANDI Q LMAIL. Com  Email address: (to be used for future annual report notification)
City/State and Zip Code
LENNETH WILBRANDT C LM AIL. com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KENNETTH WILBRANDT at (32) 750 -5926  Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee,  Certificate of Status Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
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i e e e e e e e e e e e e e e e e e e e
Mailing Address:  Street Address:
Registration Section Registration Section Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

A HANDY MAN SERVICE 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 7-0-2023 and assigned
Florida document number L 23 000320163	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	
KEB RENOVATION	
The new name must be distinguishable and contain the words "Limited Liabili	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	24
(Principal office address MUST BE A STREET ADDRESS)	- V)
	<u>。</u>
Enter new mailing address, if applicable:	
(Muiling address MAY BE A POST OFFICE BOX)	
IMMINING UNITED STATES TO THE BOAT	3.5
B. If amending the registered agent and/or registered office a	address on our records, enter the name of the new registere
agent and/or the new registered office address here:	·
Name of New Registered Agent:	<u>.                                    </u>
New Registered Office Address:	Enter Florida street address
	Pt 11.
1	, 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.

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(If an ef Note:	ive date, if other than the date of filing:
ord is fi	
Dated	SEPTEMBER 10, 2024
	Signature of a member or authorized representative of a member
	KENNETH WILBRAND, DR

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