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SEC TOWARDSEEFFL

COVER LETTER

	Registration So Division of Co					
cun uz		Total Handy Construction Services LLC				
SUBJEC	.1:	Name of Lim	ited Liability Company			
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please re	turn all correspo	ondence concerning this matter	to the following:			
		Simon Acuna				
			Name of Person			
			Firm/Company			
		6312 Moseley St				
			Address			
		Hollywood FL 33024				
			City/State and Zip Code	- 		
		totalhandycs@gmail.com E-mail address: (to be used for future annual report no	otification)		
For furth	er information of	concerning this matter, please c	•			
Simon A	cuna		954 9019058 at ()			
	Name (of Person	Area Code Dayti	me Telephone Number		
Enclosed	l 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)		
	Mailing Address:		Street Address: Registration S	ection		
Registration Section Division of Corporations P.O. Box 6327		Division of Co				
		The Centre of Tallahassee				
	Tallahassee,	FL 32314	2415 N. Mont	oe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

r as it now appears on our records.) ability Company)
vere filed on 08/14/2023 and assigned
ity company here:
y Company," the designation "LLC" or the abbreviation "L.L.C."
023
ddress on our records, enter the name of the new registered
N1 - 7 1
, Florida
re to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is address. I hereby confirm that the limited liability

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
AMBR	Fernano E. Acuna	6312 Moseley St, Hollywood Fl 33024	= Add
			□Remove
			□ Change
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			Change
			□Remove
			Change
			□Add
			□Remove
			Change

ective date, if other than the date of filing: (optional) (optio	effective 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 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment'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: (b) The 90th day after the filed. December 19th 2023					
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Filing Fee: \$25.00