## L24000041509

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## **COVER LETTER**

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

TO: Registration Section Division of Corporations
SUBJECT: Jerry'S Painting & Handyman Services L Name of Limited Dability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jerry Fernandez  Name of Person  Controls  L
Jerry's Painting & Handy Man Services LLC
868 Veronica Circle
City/State and Zip Code  City/State and Zip Code  JETTY FET ANGLEZ KT bbuild @ gmail. CCM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (718) 200 - 6371  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:  \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)  \$25.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address:  Registration Section  Street Address:  Registration Section

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jessy'S Runting Dick (Name of the Limited Liability Con (A Florida Limited)	mpany as It now appears on our ided Liability Company)	records.)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L240004150</u>	any were filed on 100	LAY and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li		"L1.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NA	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	ce address on our records, <u>c</u>	enter the name of the new registered
Name of New Registered Agent:		·
New Registered Office Address:	Enter Florida street	address
-	City	, Florida

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
MIGR	Jerry Fernandez	SEE VERONICA CR OCOEP FL 3476	_ DAAdd
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ffective date, if other an effective date is listed, to tote: If the date inserted ocument's effective date	d in this block does not	ng: 435 ond cannot be prior to do meet the applicable		(optional) days after filing.) Pursuant to ents, this date will not be	5 605,0207 ( : listed as t
			at 12:01 a.m. on the earl	ier of: (b) The 90th day	after the
ated 4 25 0	24	· <u> </u>			<b>~</b> .
arcii	E. Chride	dor-			
delly	Signature of a	member or authorized	d representative of a member	er	– ": <del>.</del>

Filing Fee: \$25.00