L2400086170

(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:
J. HORNE
MAR 3 0 2024

Office Use Only



100426172321

03/26/24--01015--011 **60.00



COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration So Division of Con			
FOZZY BI	EAR'S REPAIRS LLC		
SUBJECT:	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:	
	William R Heidemann		
		Name of Person	
	FOZZY BEAR'S REPAIR	S LLC	
		Firm/Company	·
	4334 NW 34th Ln		
		Address	
	Cape Coral, FL 33993		
	dylan.ross7777@outlook.co	City/State and Zip Code	
		to be used for future annual report n	notification)
For further information of	concerning this matter, please ca	all: .	
William R Heidemann		425 891-8954	
Name o	of Person	at () Area Code Day	time Telephone Number
Enclosed is a check for the	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 Addres		Street Address:	
Registration S Division of C		Registration S Division of C	
P.O. Box 632		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FOZZY BEAR'S REPAIRS 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 $\frac{02/19/20}{1}$	224 and assigned
Florida document number 1.24000086170		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
FOZZY'S HELPING HANDS LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our record	ls, enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	reet 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 A introvized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manæger	
AMBR =	Autha orized	Member

<u>Title</u>	Name	Address	Type of Action
			□Remove
			□Change
			□Add
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
· · · · · · · · · · · · · · · · · · ·			□Add
			□ Remove
			Chanca

							
							
							
	 						
					<u> </u>		
					<u>. </u>		
							
		· · · · · ·					
					····	<u></u>	
		<u></u>				· · · · · · · · · · · · · · · · · · ·	
Effective	date, if other than we date is listed, the date	the date of fi	ling:	in a Juan action		(optional)	(05.0207
Note: If t	he date inserted in thi	s block does n	ot meet the app	licable statutory	filing requireme	ays after filing.) Fursi ints, this date will r	not be listed as
Jocument	's effective date on th	e Department	of State's recor	ds.			
record s	ecifies a delayed effe	etiva data but	not an attactive	stime at 12:01	a m. on the cortin	ur of the The Ood	a doug often the
rd is filed.		ctive date, but	not an encent	time, at 12.01	a.in. on the carne	1 01. (b) The 70th	ruay affer the
	DOU 17		2021				
Dated	RCH 16			·			
	11/00.	2	4	.0			
	- Vulla	Signature o	f a member or au	thorized represen	tative of a member	 .	
	WILLIAM R. HEID	#31 4 A A C					

E11: E 635.04