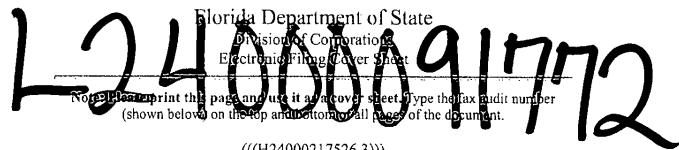
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Division of Corporations



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To:

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MULTISERVICES HANDYMAN LLC

Certificate of Status	0
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M. SOLOMON JUN 2 5 2024

Electronic Filing Menu Corporate Filing Menu

Help .

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	MULTISERVICES HANDYMAN	- -						
	(Name of the Limite	ed Liability Comp: (A Florida Limited	any as it now appears on Liability Company)	our records.) :-	•			
	The Articles of Organization for this Limited Liability Company were filed on 02/21/2024 Florida document number L24000091772					_ and assigned		
•	This amendment is submitted to amend the follo	wing:						
	A. If amending name, enter the new name of	the limited liab	oility company here:					
Ċ.	.3							
;	The new name must be distinguishable and contain the wo	ords "Limited Liabi	ility Company," the design	nation "L.L.C" or the abbro	eviation "L.L.	C.1"	_	
,	Enter new principal offices address, if applicable:		8983 OKEECHOBEE BLVD STE 202 PMB #104					
	(Principal office address MUST BE A STREE)		WEST PALM BEAG	CH, FL 33411	, , ,		_ : <	
					4		— C	
	;					=	T, E,	
1	Enter new mailing address, if applicable:		8983 OKEECHOBE	E BLVD STE 202 PM	1B#104	2	\$ 20	
Í	(Mailing address MAY BE A POST OFFICE BOX)		WEST PALM BEAG	CH, FL 33411	-	<u>o</u>		
					.	-		
<u> </u>	B. If amending the registered agent and/or reagent and/or the new registered office address	gistered office i s here:	address on our recor	ds, <u>enter the name (</u>	of the new t	egist	<u>èred</u>	
e:.	Name of New Registered Agent:	CHANGE OF ADDRESS					_	
	New Registered Office Address:	8983 OKEECHOBLE BLVD STE 202 PMB #104						
			Enter Florida si	reet address			-	
		WEST PALM	ВЕАСН	, Florida ³³⁴¹	1			
			City		Zip Code		_	

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

612

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.

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action		
MGR	CHANGE OF ADDRESS	8983 OKEECHOBEE BLVD STE 202 PMB #104	DAdd		
		WEST PALM BEACH, FL 33411	□Remove		
		· .	Change		
MGR	JEFFREY TORRES	3189 FOXRIDGE CT	DAdd		
•		LAKE WORTH, FL 33461	■Remove		
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amending any other inform	antion, enter cha	nge(s) here:	(Attach addit	ional sheets, if nec	essary.)	
						
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record specifies a delayed effec is filed.	ive date, but not an	ı effective time	e, at 12:01 a.m.	on the earlier of: (b	The 90th day	after the
ated		2024	. •			
Keingan [] [ 24, 2024 10.58	in D					
Ketugan (1//) 24, 2024 10:58	Signature of a mer					