L24000182398

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04/30/24--01005--012 **35.00

COVER LETTER

Division of Corporations									
SUBJECT: M&B HANDYMAN SERVICES LCC Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.									
Please return all correspondence concerning this matter to the following:									
BESIR BEGIC. Name of Person									
MRB HANDYMAN SERVICES LIC Firm/Company									
258 STERLING HILL DR. Address									
JACKSONVILLE FL 32225 City/State and Zip Code									
Besirbo Aol. Coly E-mail address (to be used for future annual report notification)									
For further information concerning this matter, please call:									
BESIR BEGIC at (208) 357-8185 Name of Person Area Code & Daytime Telephone Number									
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303									
Enclosed is a check for the following amount:									
□ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy									

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Nan	ne of the limited liability company: M&	B	HAN	DYM	AN	SER	ices	LLC
2. (a) <u>2</u>	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	iny:	(b)	258 STE	failing addr	ess of limit		
-	JACKSONVILLE, FL32	2225		JACK	SONV!	LL, F	232	215_
, –	04 - 17 - 2024 Date of filing/registration in Florida		<u> </u>	1240	2001 Document		98	
3. 5. (a) [_R	NC AUTHORITY RA Registered Agent and Registered Office shown on the rec	cords of the	e Florida D	Dept. of State	:	i numoer		
- -	390 NORTH ORANGE Registered Office Address (NUST BE FLORIDA ST	AV.	E.S ODRESS)	<u>re 130</u>	X - M	(C	2	
	BESIR BEGIC Enter name of NEW Registered Agent and/or NEW Re	, FL_				MILLE	1729	П = П
:	258 STERLING HILL NEW Registered Office Address:	PR.					PH 2: 29	7
-	JACKSONV/LLE	, FL_	322	25_				
change cagent wi was/wer the article	nited liability company is not organized under or changes are made, the Florida street address Il be identical. Or, in the case of a Florida lim e authorized by an affirmative vote of the mer les of organization or the operating agreement	of the re nited liab nbers of of the li	egistered ility com the limit	office and apany, it is ed liability bility com	the busing thereby concerning the company pany.	ness offic onfirmed or as oth	e of the re that the cl nerwise pi	gistered hange(s)
Be	51 Begin re of a member of authorized representative of a membe			BES	IR B	EGIC	of cionee	
I hereby provision the oblig to merel notified	s accept the appointment as registered agent a ns of all statutes relative to the proper and convertions of my position as registered agent as py reflect a change in the registered office addrin writing of this change.	nd agree	e to act in erforman for in Ch reby con	n this cana	city I fur	ther agri	e to com	oly with the and accept being filed has been
Signature	of Registered Ageof							



May 16, 2024

BESIR BEGIC 258 STERLING HILL DR. JACKSONVILLE, FL 32225

SUBJECT: M&B HANDYMAN SERVICES LLC

Ref. Number: L24000182398

We have received your document for M&B HANDYMAN SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OF BOTH FOR CORPORATIONS, but your entity is a STATEMENT OF CHANGE OF REGISTERED OFFICE OF REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

MAY 2 9 2024

Letter Number: 224A00010721