

224000322204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

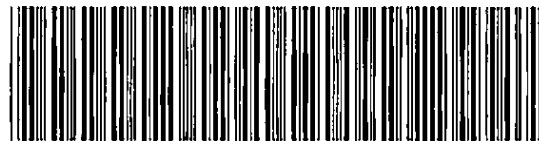
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: D & J HANDYMAN MULTISERVICES LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daykel Rubio

Name of Person

Firm/Company

3164 NW 53<sup>rd</sup> St

Address

Miami, FL 33142

City/State and Zip Code

daykel259@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daykel Rubio

Name of Person

at ( 786 )

Area Code

201-3508

Daytime Telephone Number

Enclosed is a check for the 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:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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TALLAHASSEE, FL

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D&J HANDYMAN MULTISERVICES LLC

Or, if this document is  
limited liability

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>	<u>Address</u>	<u>Type of Action</u>
MGR	INDIRA PANON	3164 NW 53 st	<input type="checkbox"/> Add
		Miami, FL 33142	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DAYKEL RUBIO	3164 NW 53 st	<input checked="" type="checkbox"/> Add
		Miami, FL 33142	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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[illegible]

(If an 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 605.0207 (3)(b)

If the record 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 record is filed.

Signature of a member or authorized representative of a member

INDIRA PANON  
Typed or printed name of signee

2021 JUN -6 PM 2:33  
ST. JOSEPH OF STATE  
HALL, MOBILE, FL

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