

L24 000 465 792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

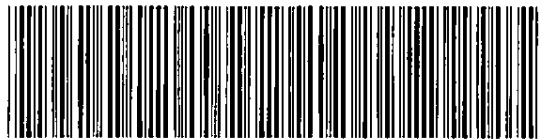
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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U.S. DEPT. OF JUSTICE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PAULO JIMENEZ HANDYMAN 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:

ASNEY JIMENEZ ACOSTA

Name of Person

PABLO JIMENEZ HANDYMAN, LLC

Firm/Company

15824 BRENDA ST

Address

HUDSON, FL 34667

City/State and Zip Code

asneyjimenezacosta@gmail.com

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

For further information concerning this matter, please call:

ASNEY JIMENEZ ACOSTA 813 328-9016

Name of Person at () _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(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.

ASNEY JIMENEZ ACOSTA

Filing Fee: \$25.00

Florida

TEMPORARY
DRIVER LICENSE



CLASS E

DL# J609-822-26-700-0

1 JIMENEZ ACOSTA
2 ASNEY
3 15824 BRENDA ST.
HUDSON, FL 34657-3890

3 DOB 11/25/1979 SEX M
4 EXP 08/12/2028 HGT 5'-05"
5 REST NONE END NONE

9 DONOR

4a REG 08/12/2024

5 DO 1/7/2009 120170



Operation of a motor vehicle constitutes
consent to any sobriety test required by law.