

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000232845

**Entity Name:** BET HANDY SERVICES LLC

**Current Principal Place of Business:**

5396 OAK BAY DR. EAST  
JACKSONVILLE, FL 32277

**Current Mailing Address:**

5396 OAK BAY DR. EAST  
JACKSONVILLE, FL 32277 US

**FEI Number: 81-4990279**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

THOMAS, BOBBY G  
5396 OAK BAY DR. EAST  
JACKSONVILLE, FL 32277 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AMBR
Name	THOMAS, BOBBY G	Name	HARMON-THOMAS, EUNICE V
Address	5396 OAK BAY DR. EAST	Address	5396 OAK BAY DR. EAST
City-State-Zip:	JACKSONVILLE FL 32277	City-State-Zip:	JACKSONVILLE FL 32277

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: BOBBY GEORGE THOMAS**

**MGR**

**03/19/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date