L21000 269112

Jerson Rodriques (Requestor's Name)
(Requestor's Name)
2505 E Boy Dr. #12
Largo FL 33771
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
JR Cosmetic Handymar (Business Entity Name)
621000269112
(Document Number)
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Special Instructions to Filing Officer:
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COVER LETTER

TO: Registration Sect Division of Corpo		
SUBJECT:	R Cosmetic Handyman LLC Name of Limited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are submitted for filing.	
Please return all correspond	ence concerning this matter to the following:	
	Jerson Rodriquez	
	JR Cosmetic Hardyman LL	C
	2505 E Bay Dr. #12	
	Largo FL 33771 City/State and Zip Code	
For further information cond	E-mail address: (to be used for future annual report notification) terming this matter, please call: $864 - 373 - 8189$	
<u>Jerson</u> Name of Po	Rodrigue " at (864) 313.8185 Area Code Daytime Telephone Number	
Enclosed is a check for the f	following amount:	
□ \$25,00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration Sec Division of Corp		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

ARTICLES OF C	ORGANIZATION SO SE
Name of the Limited Liability Compa (A Florida Limited I	
The Articles of Organization for this Limited Liability Company Florida document number L21000269112	were filed on $\frac{6/16/202 L_{cr}^{cr}}{1 - 1000 L_{cr}^{cr}}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	902 Cherry Valley Way
Enter new mailing address, if applicable:	Some
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered.
Name of New Registered Agent:	
New Registered Office Address: Q	Cherry Valley. Willy Enter Florala street address Lando Florida 320,03
	Lendo Florida 32838

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

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this change.

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>	Address	Type of Action
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		orlando FL 32228	□Remove
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s filed.	fies a delayed effe				a.m. on the ea	lier of: (b) T	he 90th day afte	er the
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-		Signature of	a member or aut	horized represer	ntative of a mem	ber		
			Typed or prii	w/riene	7			