## LUZ 000015616

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THE SECRETARY OF STATE

A. BUTLER 0CT 3 1 2022

## **COVER LETTER**

TO: Registration Section Division of Corporations							
SUBJECT: PEOPLE'S CHOICE REALTY SERVELES, LLC 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:							
C.B. Williams  Name of Person  PEOPLE'S CHOICE REALTY SERVICES, LLC  Firm/Company							
4014 Gunn Hwy Suite 243 Address							
Tampa, FL 33618 City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
C.B. Williams at (813) 493-4191  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 \$ S55 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.

		ame of the limited liability company: People's		Rool	الحداح		oc 117.	
1.	Na	ame of the limited liability company: $\frac{\sqrt{\frac{666163}{163}}}{\sqrt{\frac{1}{163}}}$			<del>-                                    </del>	767 0.00	:3 LLC	
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
		7014 Gunn Hwy Suite 243 Tampa, FL 33618		1014	Gunn	Hmy	Suite 243	
		Tampa, FL 33618		Jam	pa, FL	3361	8	
		6/20/2002		020000				
3.		Date of filing/registration in Florida 4.	•	Docu	ment nurr	iber		
	(a) (b)	Registered Agent and Registered Office shown on the records of the FI  (B. Williams  Registered Office Address (MUST BE FLORIDA STREET ADDRESS OF 10012 N Dale Mabry  Tampa , FL 3:  Enter name of NEW Registered Agent and/or NEW Registered Office	KESS) Hwy 3618		107	2022 SEP 25 AM 7: 48 SECRE DANCE OF STATE	TANKE TO SERVICE TO SE	
		NEW Registered Office Address: 4014 Counn Hwy  Tampa FL 33		<u>24</u> 3		ni ©		
cha age wa	ange ent v s/wo	imited liability company is not organized under the laws of e or changes are made, the Florida street address of the registively be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of the icles of organization or the operating agreement of the limit	f the State of stered officity company c limited listed listed	ce and the by, it is herebability comy company.	ousiness of oy confirm pany or a	office of the ned that the s otherwis	ne registered ne change(s) se provided in	
-5	Signat	sture of a member or authorized representative of a member		B. V	d or typed i	name of sign	ec	

I hereby 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, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent



October 13, 2022

C.B.WILLIAMS 4014 GUNN HWY SUITE 243 TAMPA, FL 33618

SUBJECT: PEOPLE'S CHOICE REALTY SERVICES LLC

Ref. Number: L02000015616

We have received your document for PEOPLE'S CHOICE REALTY SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Letter Number: 422A00023013

Anissa Butler Regulatory Specialist II