1/13/2021

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Division of Corporations

Florida Department of Strate Division of Corporations Electronic Filing Cover Sheet

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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.

I. Na	ame of the limited liability company: UNITED RESTOR	RATION SERVICES	LLC
2. (a)		(b)	
2. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Nate: MAYBE POST OFFICE ROX)
	3450 Spring Branch Road Montgomery, TX 77316	3450 Sprin	ng Branch Road Montgomery, TX 77315
	11/18/2014	L14000178:	568
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Jarosewicz, Michael Franklin		_
	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET > 804 Jupiter Street		
	Destin FL	32541	2021 JAN 13 A)
	C T Corporation System		AM 8: 4
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	- 4.8 - 4.8
	NEW Registered Office Address.		
	1200 South Pine Island Road		_
	Plantation, FL	33324	_
the ch agent was/w the ar	limited liability company is not organized under the lay ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members dicles of organization or the operating agreement of the	the registered office ability company, it of the limited liabili limited liability co	is hereby confirmed that the change(s) ty company or as otherwise provided in annuary. Janaging Member
•	ature of a member or authorized representative of a member		Printed or typed name of signee
provi: the ob- to me: notifie By:	thy accept the appointment as registered agent and agentions of all statutes relative to the proper and complete digations of my position as registered agent as provide rely reflect a change in the registered office address, I rel'in writing of this change. C T Corporation System	ree to act in this cap performance of my old for in Chapter 60 hereby confirm that	pacity. I further agree to comply with the chities, and I am jamiliar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signat	ure of Registered Agent Christine Kelm - Assistant Secretary		

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00