

18000210535

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

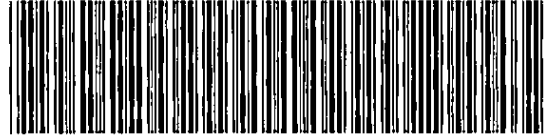
(Business Entity Name)

(Document Number)

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T. CLINE
SEP 14 2018
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Alpha & Omega Cleaning Service
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:

Erika Hardemon
Name of Person

Firm/Company

5278 Crisfield Ct
Address

Orlando Florida 32808
City/State and Zip Code

lehyrah@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Erika Hardemon at (407) 879-0352
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

2016 09 21 10:15 AM

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.

1. Name of the limited liability company: Alpha & Omega Cleaning Service

2. (a) 5278 Crisfield Ct Orlando Fla 32808 (b) _____

Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. 9/4/18 Date of filing/registration in Florida 4. L18000210535 Document number

5. (a) United States Corporation Agents Inc
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

13302 Winding Oak Ct Suite A
Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
Tampa Fl. 33612
_____, FL _____

2018 SEP 12 AM 9:13

(b) Erika Hardemon
Enter name of NEW Registered Agent and/or NEW Registered Office address:

5278 Crisfield Ct
Orlando
Orlando, FL 32808

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Erika Hardemon
Signature of a member or authorized representative of a member

Erika Hardemon
Printed or typed name of signee

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.

Erika Hardemon
Signature of Registered Agent