

L21000424053

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

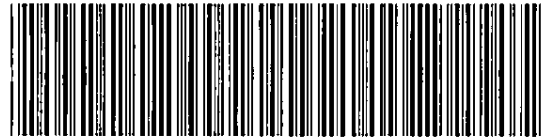
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

J. HORNE
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2024 OCT 31 PM 1:14
CLERK OF COURT
ESTATE



2248 Meridian Boulevard, Suite H
Minden, Nevada 89423

775-824-0300 - Main
800-600-1760 - Main -Toll Free
775-824-0105 – Fax
775-284-7165 – Ayelet Direct
arotem@corporatedirect.com

October 25, 2024

Florida Department of State
Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Re: **Statement of Change of Registered Agent for Limited Liability
Company – Do It Right Paint and Handyman Services, LLC**

Attached please find 2 copies of the Statement of Change of Registered Office or
Registered Agent or Both for Limited Liability Company – Do It Right Paint and
Handyman Services, LLC, and a Check in the amount of \$25 for the filing fee.

Please mail the confirmed copy of the document to me in the enclosed paid return
envelope.

Thank you for your attention to this request, please let me know if you have any
questions.

Sincerely,

Ayelet Rotem

Ayelet Rotem
Incorporating Specialist

car

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Do It Right Paint and Handyman Services, 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:

Ayelet Rotem

Name of Person

Corporate Direct, Inc.

Firm/Company

2248 Meridian Blvd., Ste H

Address

Minden, NV 89423

City/State and Zip Code

arotem@corporatedirect.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ayelet Rotem at (775) 2847165
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

**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: Do It Right Paint and Handyman Services, LLC

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3225 McLeod Dr, Suite 100

3225 McLeod Dr, Suite 100

Las Vegas, NV 89121

Las Vegas, NV 89121

09/27/2021

L21000424053

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

5. (a) ANDERSON REGISTERED AGENTS, INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

625 E. Twiggs Street, Suite 110

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Tampa, FL 33602

(b) Registered Agents Inc

Enter name of NEW Registered Agent and/or NEW Registered Office address:

7901 4th St N

NEW Registered Office Address:

STE 300

St. Petersburg, FL 33702

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.

Ayelet Rotem
Signature of a member or authorized representative of a member

Ayelet Rotem, Authorized Representative
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.

David Roberts David Roberts - Assistant Secretary
Signature of Registered Agent

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

FILED
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TAMPA, FL

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(Note: MUST BE STREET ADDRESS)

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

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Las Vegas, NV 89121

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09/27/2021

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NEW Registered Office Address:

STE 300

St. Petersburg, FL 33702

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Ayelet Rotem
Signature of a member or authorized representative of a member

Ayelet Rotem, Authorized Representative

Printed or typed name of signer

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David Roberts David Roberts - Assistant Secretary
Signature of Registered Agent

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FILING FEE: \$25.00

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TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS