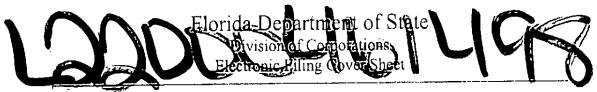
2/24/25, 3:38 PM

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H250000703773)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : UNITED CORPORATE SERVICES, INC.

Account Number : 120140000108 Phone : (914)949-9188 Fax Number : (914)949-9618

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC REGISTERED AGENT CHANGE SHAW MECHANICAL SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

3

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.

. Na	ome of the limited liability company:SHAW MECHA	NICALS	SERVICES, I	rc			
	350 W State Road 434	i	(b) 350 W State Road 434				
. (a)	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	'	(b)				
	Longwood, FL 32750		Longwood	1, FL 32750			
	:0/28/2022	_ _	L2200046	1498			
	Date of filing/registration in Florida	4.		Document number			
(a)							
(4)	Registered Agent and Registered Office shown on the records of Urschel, Randy	the Florid	a Dept. of Sta	 re:			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u></u>	_		2	
	350 W State Road 434				<u>Trais</u>	025	
	Longwood, FI	32750 L	· · · · · · · · · · · · · · · · · · ·	-		2025 FEB 24	<u>-:1</u>
						F	ياا"لا يااايا
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office a	drase:	-	<u> </u>	7	Ö
	Enter name of NEW Registered Agent and/or NEW Registered	u Olinee a	<u>uureaa</u> .				
	United Corporate Services, Inc.				85		
	NEW Registered Office Address:			-	I>	·	
	3458 Lakeshore Drive			_			
	Tollahassec	32312					
	Toilahassee, FI			-			
nge nt v s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited libere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	register ability co of the lin	ed office an ompany, it i nited liabilit liability con	d the business office s hereby confirmed il y company or as othe noany.	of the regi	stered ngc(s)	
is	ture of a member or authorized representative of a member			Printed or typed name o	of signee		
nerel ovisi obli mere tified	by accept the appointment as registered agent and agi ons of all statutes relative to the proper and complete igations of my position as registered agent as provide the reflect a change in the registered office address, I i I in writing of this change.	ree to ac perform d for in hereby c	t in this cap ance of my Chapter 603 onfirm that	acity. I further agree duties, and I am Jami , F.S. Or, if this doc the limited liability c	to comply liar with a ument is b ompany ho	with t and acc eing fü is been	he epi ed
Mu	chael A. Barr						