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## **COVER LETTER**

Division of Corporations					
SUBJECT: The Cleary Group Home Services L	The Cleary Group Home Services LLC				
	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter t	to the following:				
Joseph Cleary					
Name of Person					
The Cleary Group Home Services					
Firm/Company	<del></del>				
2945 Woodpine Circle					
Address					
Sarasota, FL 34231					
City/State and Zip Code					
joe@theclearygroup.com					
E-mail address: (to be used for future annual repor	t notification)				
For further information concerning this matter, please ca	all:				
Joe Cleary at (94	650-8485				
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:					
<b>☑</b> \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				

TO: Registration Section

## 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. N:	ame of the limited liability company:  The Cleary Greater Company of the limited liability company of the liab	oup Ho	ome Serv	vices LLC
2. (a)	2945 Woodpine Cir., Sarasota, FL 34231	(b	, 2945 W	/oodpine Cir., Sarasota, FL 34231
Z. (d)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2945 Woodpine Cir.		2945 W	oodpine Cir.
	Sarasota, FL 34231	_	Saraso	a, FL 34231
	June 11, 2025		L250002	73737
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	NORTHWEST REGISTERED AGENT LLC			
J. (u)	Registered Agent and Registered Office shown on the records of th	ie Florida	Dept. of Sta	te:
				_
	Registered Office Address (MUST BE FLORIDA STREET AL	<u>DDRESS</u>	Ž.	
	7901 4TH ST N STE 300			   125   ECR
	ST. PETERSBURG . FL.	33702		PIL-7
(b)	Joseph Cleary	<del></del>		ري
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ado	dress:	MHIO: 26 SEE, FL
	NEW Registered Office Address:			_
	2945 Woodpine Cir.			_
	Sarasota, FL	34231		~
the cha agent v was/we the arti Signa I here provisi the obli to mero	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabete for a member or authorized representative of a member by accept the appointment as registered agent and agreeions of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I he drip writing of this change.	the regis bility co the lim imited l Jos	stered officempany, it ited liability core eph T. C	re and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.    leary

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

Signature of Registered Agent