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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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 A & B RESIDENTIAL SERVICES LLC

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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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of

(a)	(b)					
. (,	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited hability company (Note: MAY BE POST OFFICE BOX)			
	02/28/24	L2400	00102792			
	Date of filing/registration in Florida	4.	Document number			
(a)	UNITED STATES CORPORATION AGENTS, INC.					
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	476 RIVERSIDE AVE.		_			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		, S			
	Acquired once, and a series of the series of	<u> 1 ADDRESS)</u>	TALLI			
			TALLAMA			
(b)			FILED 24 HAR -5 PHI RESTALL ATTASSES			
(b)	JACKSONVILLE .	FL_32202	FILED 24 HAR -5 PH 12: 4 SEGNITARIASSEE F			
(b)	JACKSONVILLE	FL_32202	FILED 2024 HAR -5 PH 12: 48 SECRETALLAMASSEE, FL			
(b)	JACKSONVILLE Registered Agents Inc Enter name of NEW Registered Agent and or NEW Register	FL_32202	FILES PHI2: 48 SESTALL AMASSEE FL			
(b)	JACKSONVILLE Registered Agents Inc Enter name of NEW Registered Agent and or NEW Register 7901 4th St N	FL 32202 red Office address:				

the articles of organization or the operating agreement of the limited liability company.

Baking Taman	Robin Jones
Signature of a member or authorized representative of a member	Printed or typed name of signee

Thereby 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. Thereby confirm that the limited liability company has been notified in writing of this change.

David Pents	David Roberts	 Assistant Secretary
Signature of Registered Agent		 _