F19 0000000042

(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:			
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COVER LETTER

TO:	Amendment Section Division of Corporations	·
SUBJI Name	ECT: HOUSEHAPPY INC. of Corporation	. <u></u> .
DOCU	JMENT NUMBER: F19000000042	
The en	nclosed Statement of Change of Registered	Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this	matter to the following:
	LE CHURIK	· · · · · · · · · · · · · · · · · · ·
	of Contact Person	
	ARCH, INC.	
	Company	
	MAIN STREET, STE 750-709	
Addre		
	SOTA, FL 34236	
City/S	tate and Zip Code	
• -	UNISOP@UNISEARCH.CO	
E-mai	il address: (to be used for future annual	report nouncation)
For fu	rther information concerning this matter, p	please call:
JOELI	LE CHURIK	at (888 \ \617-4478
	Name of Contact Person	at (888)617-4478 Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of DELAWARE	
in orde	r to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of t	the corporation: HOUSEHAPPY INC.	
2. The principal	office address: 2715 SE 8TH AVE STE 118PORTLAND, OR 97202	
	2715 CE OTU AVE CTE 110DODTI AND OD 07202	
3. The mailing a	address (if different): 2715 SE 8TH AVE STE 118PORTLAND, OR 97202	
	poration/qualification: 01/02/2019 Document number: F19000000042	
	I street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)	
	UNISEARCH, INC.	
	155 OFFICE PLAZA DRIVE	
	TALLAHASSEE, FL 32301	
6. The name and street address of the new registered agent (if changed) and /or registered office; (if changed): UNISEARCH, INC.		
	UNISEARCH, INC.	
	1990 MAIN STREET, STE 750-709	
	P.O. Box NOT acceptable	
	SARASOTA, FL 34236	
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.	
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.	
Signatu	re of an officer or director Printed or typed name and title	
I famelana a ancia	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.	
λ.	11/15/2021	
Na State Control of the Control of t	nature of Registered Agent Date	
If signing on be	chalf of an entity:	
	IK, ASST. SECRETARY	
Т	'yped or Printed Name	
	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)