## City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) ₩alk in Pick up time Certified Copy ☐ Will wait Photocopy ☐ Mail out Certificate of Status **NEW FILINGS AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other Examiner's Initials

CR2E031(7/97)



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

October 18, 2001

ROY & MARLENE DAVIS 7255 CORPORATE DR., APT. \$508 HOUSTON, TX 77036

SUBJECT: HOOD DEGREASING SYSTEMS, LLC

Ref. Number: L01000007624

We have received your document for HOOD DEGREASING SYSTEMS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Michelle Hodges Document Specialist

Letter Number: 101A00057599

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: HOOD DEBREASING SYSTEMS.
2. The mailing address of the limited liability company is: 7255 CORPORATE OR.
APT. 508 HOUSTON, TX 77036
MAY 11, 2001.  3. Date of filing/registration in Florida  4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Roy PAUS Name Name Name
1/S00 Summit WEST BLVD Apr. 31c Address
TEMPLETE (RACE, F) 336/7 City, State and Zip
6. The name and address of the new registered agent and/or office:
- Michelle Fields, 1211/ Tensly Cir Janya 26.33612
Florida street address (P.O. Box NOT acceptable)
FL
City, State and Zip
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.
(Simple of Miles
(Signature of a member or authorized representative of a member)
(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 608, 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.
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

**FILING FEE: \$25.00**