

L04000092475

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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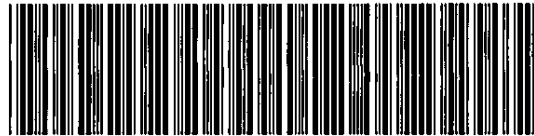
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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M. THOMAS

AUG 19 2008

EXAMINER



ALL FLORIDA FIRM INC

813 Deltona Blvd, Ste A
Deltona, FL 32725
Phone 386-575-1180

8/12/2008

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE:

L04000092475

Please find a check and change of registered agent forms for the following corporations and/or LLC's.

OMEGA PRESSURE CLEANING, LLC

5905 NE 2ND STREET

OKEECHOBEE, FL 34974

Sincerely,

All Florida Firm, Inc.

FILED
08 AUG 18 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2008 AUG 15 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: **OMEGA PRESSURE CLEANING, LLC**
2. The principal office address: **5905 NE 2ND STREET OKEECHOBEE FL 34974**
3. The mailing address (if different): **5905 NE 2ND STREET OKEECHOBEE FL 34974**
4. Date of incorporation/qualification: **12/22/2004** Document number: **L04000092475**
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

**TIMOTHY L SILLS
5905 NE 2ND STREET
OKEECHOBEE FL 34974**

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

**ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A
DELTONA, FL 32725**

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)


(Printed or typed name and title)

*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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*


(Signature of Registered Agent)

July 14, 2008
(Date)

If signing on behalf of an entity:

***** FILING FEE: \$35.00 *****

**MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314**

AUG 08 2008

**FILED
08 AUG 18 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**