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## COVER LETTER

Division of Corporations	
SUBJECT: All Safe Home Watch Services LLC	
Name of Lim	ited 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	to the following:
Lauren Blosser	
Name of Person	<del></del>
All Safe Home Watch Services LLC	
Firm/Company	<del></del>
1579 SW 6th Court	
Address	
Boca Raton, FL 33486	
City/State and Zip Code	<del></del>
info@allsafehomewatch.com	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	11:
Lauren Blosser 56	1 271-2212
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
S25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## 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.

l. N	ame of the limited liability company: All Safe Home W	Vatch Se	rvice	s LLC				
2. (a)			(b)					
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)					
	1579 SW 6th Court		Boca Raton, FL 33486					
	Boca Raton, FL 33486	<del></del>						
	1/8/2020		L	)7000089 _	2396			
3.	Date of filing/registration in Florida	4.		-	Document n	umber		
5. (a)	All Safe Home Watch Services LLC							
(,	Registered Agent and Registered Office shown on the records of Lauren K Blosser	the Flor	ida D	ept. of Sta	te:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_			
	4301 Oak Circle #23		 보인				020 /	
	Boca Raton FI	33431			_	RETARY OF	2020 AUG 24	1
	-		•		<del>-</del>	2977973		
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			_	1111 -5			
	The finale of Mark Registered Agent and of Mark Registered	<u> Contee</u>	auu <u>i</u>	<u>:3a</u> .		STATE	3: 34	
•	NEW Registered Office Address:				_			
	1579 SW 6th Court			-16-1	_			
	Boca Raton, FI_	33486			_			
change agent was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricular of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. It is of Registered Agent	registe ability of the life limited	ered composited mited in the liab	office an pany, it is defined the definition of	ad the business is hereby confity company or inpany.  Printed or type activ. I further duties and Leading.	s office of the immediate of the immedia	the reg the cha ise pro	istered inge(s) vided in