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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO:	Registration Section Division of Corporations				
SUBJI	Accutilities, LLC				
	· · · · · · · · · · · · · · · · · · ·	ne of Limited	Liability Company		
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Off	ice Change ar	nd fee(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to th	ne following:		
Isabe	elo Rodríguez				
	Name of Person	· · · · · · · · · · · · · · · · · · ·			
Accut	illities, LLC				
	Firm/Company				
P.O. 1	Box 278605				
	Address				
Miran	nar, FL 33027				
	City/State and Zip Code	-,			
irodriç	guez@accutilities.com				
	-mail address: (to be used for future ann	ual report not	tification)		
For fur	ther information concerning this matter.	please call:			
Isabe	lo Rodríguez	954 at (439-4242		
	Name of Person		Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	F 11 1	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, Florida 32314		
Enclosed is a check for the following amount:					
	☑ \$25 Filing Fee	ū	\$55 Filing Fee & Certified Copy		
INHST	8 (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.

1. Na	ame of the limited liability company: Accutilities LI	LC			
2. (a)	Isabelo Rodríguez	(b) Isabelo	(b) Isabelo Rodríguez		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	10750 NW 138th Street / Bay #6	P.O. Bo	x 278605		
	Hialeah Gardens, FL 33018	Mirama	r, FL 33027		
	02/16/2010	L100000	17644		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Isabelo Rodríguez				
<i>J.</i> (11)	Registered Agent and Registered Office shown on the records of	î the Florida Dept. of Sta	te:		
			_	TAS .	
	Registered Office Address (MUST BE FLORIDA STREET		18 A		
	5161 SW 173rd Avenue			AUG AHAN	
	Miramar FI	_33029	_	-6 -6	
(b)	Isabelo Rodriguez			AMID: 27	
(.,,	Enter name of NEW Registered Agent and/or NEW Registered	_	MID: 27		
	10750 NW 138th Street			> 7	
	NEW Registered Office Address:		_		
	Bay #6				
	Hialeah Gardens . FI	_33018			
signa I here provis the ob.	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization of the operating agreement of the authorized representative of a member by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of all my position as registered agent as provided by reflect a thange in the registered office address. I	of the registered officiability company, it of the limited liability color liability limited liability liabi	te and the business off is hereby confirmed the ty company or as other mpany. Printed or typed name of the pacity. I further agree to duties, and I am Jamis 5, F.S. Or, if this docional is the second of the seco	rwise provided in f signee to comply with the liar with and accept unent is being filed	
notifie Signaty	d'in writinglof this change.		·		