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COVER LETTER

SUBJECT: AL Services OF TAMPA BAY LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: 60x don JERLYN OR ALAN SPICER Name of Person AL SERVICES OF TAMPA BAY LLC AKA ALSPICEX Finn/Company 1959 Sunnyhills DK Address Bravidon IL 33510 City/State and Zip Code Best Choice 2022 & G. Math. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please cult: AL SPICER or DAVED at 8/3 842-2255 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 Enclosed is a check for the following amount: 10 \$55 Filing Fee 10 \$55 Filing Fee & Certified Copy INISIN (2/14)	TO: Registration Section Division of Corporations			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: For don Services of Tampa Bry LLC AKA ALSPICER Name of Person AL Services of Tampa Bry LLC AKA ALSPICER Firm/Company 1969 SupplyHTLLS DK Address Bravidon ft 33510 City/State and Zip Code Best Choice Zozz & G ward Com Hemail address: (to be used for future annual report notification) For further information concerning this matter, please call: AL SPICER or DAVED at \$13 892 2255 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 Enclosed is a check for the following amount: Established DESTINATION OF CORPORATION CORPORAT	SUBJECT: AL Services OF TAN	A PA BAY LLC ited Liability Company		
Please return all correspondence concerning this matter to the following: Bordon JERLYN OR ALAN SPICER Name of Person AL SERVICES OF TAMPA BAY LLC AKA ALSPICEK Firm/Company 1959 SupplyHILLS DK Address Bravidon IL 33510 City/State and Zip Code Best Choice Zozz & G. Wath. Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AL SPICER or DAVED at \$13 SYZ-ZZSS 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 Enclosed is a check for the following amount: SSSS Filing Fee CINISIS (2/14)	Dear Sir or Madam:			
Services of Tampa Bry LLC AKA ALSPECEK Firm/Company 1909 Sunnyallus DK Address Bravidor fl 33510 City/State and Zip Code Best Choice 2022 & Wath Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AL SPICER & DAVED at \$13 \text{ By 2-225} Name of Person STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec. Florida 32301 Enclosed is a check for the following amount: Established: SSS Filing Fee Intervious AKA ALSPECEK Firm/Company Address Bravidor fl 33510 City/State and Zip Code ANALING ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec. Florida 32314	The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.		
SERLYN OR ALAN SPICER	Please return all correspondence concerning this matter	to the following:		
AL SERVICES OF TAMPA BRY LLC AKH ALSPICEK Firm/Company 1909 SupplyHELS DK Address Brand address: (to be used for future annual report notification) For further information concerning this matter, please call: AL SPICER or DAVED at (\$13) 892-2255 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Robins Clifton Building P.O. Box 6327 Tallahassee, Florida 32301 Enclosed is a check for the following amount: 1 S55 Filing Fee	Gordon			
Firm/Company 1969 SupplyHTLLS DK Address Bravickon FL 33510 City/State and Zip Code Brasil choice 2022 G Web Com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AL SPICER or Daved at \$13 \$922 2255 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32301 Enclosed is a check for the following amount: S25 Filing Fee S55 Filing Fee & Certified Copy S81 Filing Fee S82 Filing Fee & Certified Copy S83 Filing Fee S64 Filing Fee & Certified Copy S84 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee S65 Filing Fee & Certified Copy S85 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee S85 Filing Fee & Certified Copy S85 Filing Fee	JERLYN OR ALAN SPICER Name of Person			
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E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AL SPICER or DAVED at \$13 892-2255 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 Enclosed is a check for the following amount: Exercise 2022 © Wath Comp. By 3 892-2255 Area Code & Daytime Telephone Number MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Enclosed is a check for the following amount: Exercise 2022 © Wath Comp. By 3 592-2255 Area Code & Daytime Telephone Number Tallahassee Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	Address			
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Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$\begin{align*} \text{Registration Section} \\ \text{Division of Corporations} \\ \text{P.O. Box 6327} \\ \text{Tallahassee, Florida 32314} \\ \text{Tallahassee, Florida 32301} \\ \text{Enclosed is a check for the following amount:} \\ \text{U \$\$55 Filing Fee & Certified Copy} \\ \text{INHS18}(2/14)				
Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: S25 Filing Fee Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32314 Enclosed is a check for the following amount: S25 Filing Fee Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32314				
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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. Nar	ne of the limited liability company: AL SERVICES OF	TAMPA BAY LLC
?. (a) _	1409 SUNNYHILLS DR Branda, IL (b) Principal office address of limited liability company: 3 3510 (Note: MUST BE STREET ADDRESS)	(Same) 1409 Survey Wills Dr. Brend Mailing address of limited liability company: 335 (Note: MAY BE POST OFFICE BOX)
-	Date of filing/registration in Florida 4.	L 1 0 0 0 0 0 5 2 3 0 4 Document number 3 5 5 5
i. (a)	Jerlyn Spicer	
	Negistered Agent and Registered Office shown on the records of the Florida Dept. of 1409 Survey hills Dix, Brandon FL 33510 Registered Office Address MUST BE FLORIDA STREET ADDRESS	
		00 E
(h) _		
1	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	AL SPICER	
	NEW Registered Office Address:	
,	, F1	
he chan gent wi vas/wer	nited liability company is not organized under the laws of the State of ge or changes are made, the Florida street address of the registered of the identical. Or, in the case of a Florida limited liability company authorized by an affirmative vote of the members of the limited liability of organization or the operating agreement of the limited liability	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
6:	Jan	Printed or typed name of signee
hereby rovisió he oblis o merel	re of a number of authorized representative of a member very accept the appointment as registered agent and agree to act in this ins of all statutes relative to the proper and complete performance of actions of my position as registered agent as provided for in Chapte, verteet a change in the registered office address, I hereby confirm in writing of this change.	e conscitu. I further amena to commb with the