<u>L10000120533</u>

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COVER LETTER '

Division of Corporations
SUBJECT: PAMPER POOL SERVICE CONSTRUCTION & REMOVATION Name of Limited Liability Company
Name of Emitted Elability 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:
Name of Person
PAMPER POOL SERVICE CONSTRUCTION + RENOVATION, LCC Firm/Company
517 5. FLAGLER AVE Address
POMPANO BEACH To 33060 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TEFFREY ROLAND at (954) 781-1540 Name of Person Area Code & Daytime Telephone Number
Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations P.O. Box 6327 Clifton Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
\$25 Filing Fee \$\square\$ \$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.

1. Na	ame of the limited liability company: PAMPER POOL SERVICE CONSTRUCTION	١
2 ()	ame of the limited liability company: STANDER TOOK WEENOU ATTOON LLC STANDER AVE (b) 517 5 FLAGER AVE	
2. (a)	Principal office address of limited liability company: Mailing address of limited liability company:	
	(Note: MAY BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)	
	POMPANO BEACH FL 33060 POMPANO BEACH FL 330	0 L O
2	1-28-16	
3.	Date of filing/registration in Florida 4. Document number	
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	30 SW 5 CT.	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
d V	POMPANO BEACH, FL 33060	
(b) _	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
	The state of the s	
	SIT S. FLAGLEK AVE NEW Registered Office Address:	
	NEW Registered Office Address:	
	POMPANO BEACH, FL 33060	
the chan agent wi was∕wer	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nige or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) re authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of pregnization or the operating agreement of the limited liability company.	
	ure of a member or authorized representative of a member DEFFREY ROLAND Printed or typed name of signee	
- •		
	y accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept gations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been in writing of this change. Of Registered Agent	