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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: High End Service, 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:
Angle Heijes Name of Person High Encl Service Firm/Company 13020 Belcher Rd S Address Lav 40 Fla 33773 City/State and Zip Code City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Andi Warres 727 Carl 22 Va
Name of Person at (727) 524-2210 Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Division of Corporations P.O. Box 6327 Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount:

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

, 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	me of the limited liability company:	end	Ser	lice,	LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)		-	Ner R s of limited liab BE POST OF	
	Largo, 7/a 33773	_		<u>arqc</u>), Ha	. 33773
3.	Date of filing/registration in Florida	4.		NOOO	<u> </u>	29
5. (a)	Registered Agent and Registered Office shown on the records of the				iumoer	
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)				
(b)	<u>Clearwater</u> , FL E. Peter Alonso	33	156		SECRETARY INLLAHASSEE	CONTRACTOR OF THE PERSON OF TH
	Enter name of NEW Registered Agent and/or NEW Registered Control NEW Registered Office Address:		<u>ress</u> :		P 1: 56 OF STATE FLORIDA	
	Largo, FL	33	773			
the cha agent w was/we the arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of elegan organization or the operating agreement of the law ture of a member or authorized representative of a member	the regist bility confithe limited li	ered office mpany, it is ted liability ability com	e and the bus s hereby con y company c ppany.	siness office firmed that t	of the registered he change(s) se provided in
I herei	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pieceties of my position as registered agent as provided by reflect as sharpe in the registered office address, I have till got his change.	ee to act performa I for in C ereby co	in this cape nce of my c hapter 605 nfirm that i	acity I forth	her agree to	comply with the
Signatu	re of Registered Agent					