## epartment of State

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To:

Division of Corporations

Fax Number : (850)617-6383

Please honor 07111/2022 date

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081

: (307)200-2803

Phone Fax Number

: (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE AMERICA'S NUMBER 1 CLEANING SOLUTIONS, LLC

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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.

1. N	lame of the limited liability company: America	i's Numb	er 1 Cleaning Solutions, LL		
2. (a)					
` '	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	03/03/11		1000026794		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a	Meehle, Suzanne D., Esq.				
J. (a	/	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	1215 E Concord Street				
	Registered Office Address (MUST BE FLORIDA STREET	`` ``			
	Orlando , F	T. 32803			
	• • • • • • • • • • • • • • • • • • • •	L			
(b)			1 17 4: 5 1 17 4: 5		
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address:			
	7901 4th St N		क द्विती		
	NEW Registered Office Address:				
	STE 300				
	Ct. Data rale was	00700			
	St. Petersburg	<sub>L</sub> 33702			
the ch	limited liability company is not organized under the la ange or changes are made, the Florida street address of	of the registered	office and the business office of the registered		
was/w	will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the limited l	iability company or as otherwise provided in		
	Rilly Park		Riley Park		
_	ature of a member or authbrized representative of a member		Printed or typed name of signee		
mounit	thy accept the appointment as registered agent and agions of all statutes relative to the proper and complet digations of my position as registered agent as provid ely reflect a change in the registered office address, and in writing of this change.		is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been		
Signate	Bill Havre - Assista	nt Secretary			