

L11 000052036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

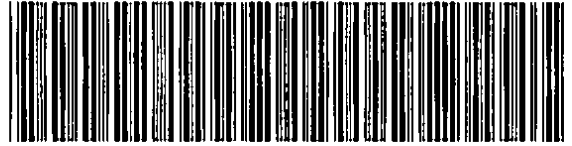
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OFFICE OF CORPORATIONS  
2022 DEC 12 PM 4:18

# COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** One of A Kind Environmental Services LLC  
Name of Corporation

**DOCUMENT NUMBER:** L11000052036

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Charlie Rice III

Name of Contact Person

One of A Kind Environmental Services LLC

Firm/Company

PO Box 858

Address

Aiken, SC 29802

City/State and Zip Code

billing@oakservices.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charlie Rice III

Name of Contact Person

at (803) 443-9232

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida \_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: One of A Kind Environmental Services LLC
2. The principal office address: 3039 Charleston Hwy, Aiken 29801
3. The mailing address (if different): PO Box 858 Aiken, SC 29801
4. Date of incorporation/qualification: 7/07/2015 Document number: L11000052036
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Charlie Rice President

5400 N Ocean Blvd

Singer Island, FL 33404

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

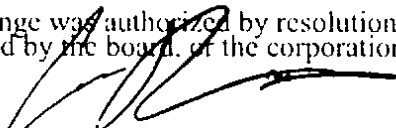
Charlie Rice III

321 18th Ave NW Naples, FL 34120

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

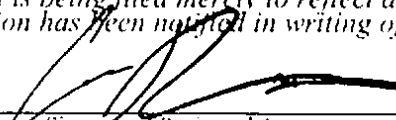
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, of the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Charlie Rice III, President

\_\_\_\_\_  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

12/6/2022

\_\_\_\_\_  
Date

If signing on behalf of an entity:

Charlie Rice III  
\_\_\_\_\_  
Typed or Printed Name

**\*\*\* FILING FEE: \$35.00 \*\*\***