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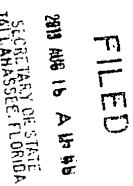
(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
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	Special Instructions to Filing Officer:

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AUG 2 0 2018 T. LEMIEUX

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: HB Cleaning of Haire Maintenance 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:						
April De Rossett Name of Person						
ABCleaning & Home Maintenance Firm/Company						
1119 Clayton Ave Address						
Lihigh Acres, FL 33972 City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
April DeRossett at (339) 209-7039 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 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 \$\simega\$ \$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.	Name of the limited liability company: <u>AB Clea</u>	ining o H	una Maintenance		
2 (2)	(b)			
(0	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(//	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1119 Clayton Ave		same		
	Lehigh Acres, FL 33972				
	2019		2000045386		
3.	Date of filing/registration in Florida	4.	Document number		
5. (Registered Agent and Registered Office shown on the records of	·····	_		
	Registered Agent and Registered Office shown on the records of	the Florida Dept. of St	late:		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRECC	~		
	215 Manatio St		_		
	Fort Myers, FL	. 33913	_ <u>\$40</u> \$		
41			A 70		
(b	(b)				
			SSER - ITT		
		<u>.</u>	THE TALL		
	NEW Registered Office Address:		ON THE		
	1119 Clayton Are	<u>.</u>	- Pro 6		
	1119 Clayton Are Lehigh Acres , FL	33972-			
If the	limited liability company is not organized under the law		Clarida it is hereby confirmed that after		
the c	nange or changes are made, the Florida street address of	the registered offi	ce and the business office of the registered		
was/v	will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members o	f the limited liabil	ity company or as otherwise provided in		
the a	ticles of organization or the operating agreement of the	limited liability co	ompany.		
Sign	give of a member or authorized representative of a member	- 1-PO 11	Printed or typed name of signee		
l her	eby accept the appointment as registered agent and agr	ee to act in this ca	nacity. I further goree to comply with the		
provi the or to me	sions of all statutes relative to the proper and complete oligations of my position as registered agent as provided rely reflect a change in the registered office address, I h red in writing of this change.	performance of m I for in Chapter 60 nereby confirm tha	y duties, and I am familiar with and accept 05, F.S. Or, if this document is being filed at the limited liability company has been		
Signá	And of Registered Agent				