## L13000019164

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## COVER LETTER

## **TO:** Registration Section Division of Corporations

SUBJECT: US Framing International, 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:

Ashley Canez

Name of Person

US Framing International, LLC

Firm/Company

5348 Vegas Dr

Address

Las Vegas, NV 89108

City State and Zip Code

info@incparadise.com

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

For further information concerning this matter, please call:

	ez	at (	) 871-8678
	Name of Person		Area Code & Daytime Telephone Number
SI	REET/COURIER ADDRESS:	N	IAILING ADDRESS:
Re	gistration Section	R	egistration Section
Di	vision of Corporations	D	ivision of Corporations
CI	ifton Building	Р	.O. Box 6327
26	61 Executive Center Circle	Т	allahassee, Florida 32314
Ta	Ilahassee, Florida 32301		

S25 Filing Fee

□ \$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.

Na	me of the limited liability company:		
(a)	11420 WATTERSON CT STE. 100	(b)	) 11420 WATTERSON CT STE. 100
	Principal office address of limited liability compar ( <u>Note: MUST BE STREET ADDRESS</u> )	av:	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	LOUISVILLE, KY 40299		LOUISVILLE. KY 40299
	05/31/2013		L13000079764
	Date of filing registration in Florida	4.	Document number
(a)	Valentine, Patricia A		
	Registered Agent and Registered Office shown on the rece	ords of the Florida	Dept. of State:
	9447 Myrtle Creek Ln #112		
	9447 Myrtle Creek Ln #112 Registered Office Address ( <u>MUST BE FLORIDA ST</u>	REET ADDRESS)	2
		<u>REET ADDRESS</u>	2
(b)	Registered Office Address (MUST BE FLORIDA ST		2
(b)	Registered Office Address (MUST BE FLORIDA ST	FL_ <sup>32832</sup>	2
(b)	Registered Office Address (MUST BE FLORIDA ST Orlando Registered Agents Inc	FL_ <sup>32832</sup>	2
(b)	Registered Office Address <u>(MUST BE FLORIDA ST</u> Orlando Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and or <u>NEW Reg</u>	FL_ <sup>32832</sup>	2

agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member of a utborized representative of a member

THOMAS ENGLISH

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

David Roberts

Signature of Registered Agent

Division of Corporations + P.O. Box 6327 + Tallahassee, FL 32314 **FILING FEE: \$25.00**