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(Red	questor's Name)
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Certified Copies	_ Certificates of Status
Special Instructions to I	Filing Officer:
	Office Use Only



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NOV 1 6 2016 S. YOUNG SECRETARY OF STATE ALLAHASSEE, FLORID

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Tropical Pressure Cleaning 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:

Renee Stallone

Name of Person

Tropical pressure Cleaning LLC

Firm/Company

9858 glades Rd Unit 730

Address

Boca Raton 33434

City/State and Zip Code

info@tropicalpressurecleaning.com

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

For further information concerning this matter, please call:

Renee Stallone	561 672-5702			
Name of Person	Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
Clifton Building	P.O. Box 6327			
2661 Executive Center Circle	Tallahassee, Florida 32314			
Tallahassee, Florida 32301				
Enclosed is a check for the following	g amount:			
☑ \$25 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.

1. N	ame of the limited liability company: Tropical pre-	ssure C	leaning LL	_C		
2. (a)	Tropical Pressure Cleaning LLC	((b) Tropical Pressure Cleaning LLC			
2. (u)	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)	(·	Mailing address of limited liabi (Note: MAY BE POST OF)		
	9858 Glades Rd unit 730		9858 GI	lades Rd unit 730		
	Boca Raton FI 33434		Boca Ra	aton FI 33434		
	9/23/13		L130001	34152		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Renee Stallone					
5. (a)	Registered Agent and Registered Office shown on the records o	of the Florid	a Dept. of Stat	 ie:		
	Tropical Pressure Cleaning LLC					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	TAL	
	9858 Glades Rd unit 730	730			S NG	
	Boca Raton, F	133434	•	_	TE NOV 15	
(b)	Renee Stallone				PH 4: 22	
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office a	<u>ldress</u> :	_	1	
	Tropical Pressure Cleaning				8 př	
	<u>NEW</u> Registered Office Address:			-		
	9858 Glades Rd Unit 730			_		
	Boca Raton	L_33434	•	_		
the ch agent was/w the art Signa I here provis the ob to mer	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited by where authorized by an affirmative vote of the members tickes of organization or the operating agreement of the member of a member or authorized representative of a member eby accept the appointment as registered agent and ag it is of all statutes relative to the proper and complet ligations of all statutes relative to the proper and complet ligations of all statutes relative to the proper and complet ligations of all statutes relative to the proper and complet ligations of all statutes relative to the proper and complet ligations of all statutes relative to the proper address. In the proper of the proper of the proper address of the proper of the proper of the proper address. In the proper of the proper of the proper address of the proper of the proper of the proper address of the proper of the proper of the proper of the proper of the proper address of the proper of the proper of the proper of the proper address of the proper of the pr	of the reg liability c of the lin e limited <u>Re</u> gree to ac	istered offic ompany, it i nited liabilit liability cor enee Stallo	e and the business office of is hereby confirmed that the ty company or as otherwise mpany. Dne Printed or typed name of sign pacity. I further agree to a duties and I am familiar	of the registered he change(s) se provided in we we comply with the with and accept	
	Alton					
Signati	activitegistered Agent					
	Division of Corporations• P.O. FILING			ssee, FL 32314		

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