## L/4000084451

Office Use Only



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SECRETARY OF STATE
JALLAHASSEE, FLORIDA

MG 19 PH 4: 18

K.SALY EXAMINER AUG 20 2015

## COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations					
SUBJ	SOUTH FLORIDA HOME MAINTENANCE LLC					
	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning the	his matter to the following:				
Willia	am Tordjman .					
	Name of Person					
	Firm/Company					
2125	Biscayne Blvd. Suite 361					
	Address	<del></del>				
Miam	ni FL 33137					
	City/State and Zip Code					
wtorc	ljman@gmail.com					
Ē	-mail address: (to be used for future an	nual report notification)				
For fu	rther information concerning this matter	r, please call:				
Willia	m Tordjman	at ()				
	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:						
	<b>△</b> \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				

## 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. Na	me of the limited liability company: SOUTH FLOR	IDA H	OME MAI	NTENANCE LLC		
2. (a)	2125 Biscayne Blvd. Suite 361	(b	2125 Bis	scayne Blvd. Suite 361		
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (°		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Miami, FL 33137	_	Miami, F	L 33137		
	05/27/2014	_	L1400008	34451		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	GENDRE, ANTOINE					
·	Registered Agent and Registered Office shown on the records of the 805 N ANDREWS AVENUE	::				
<u> 814 25.</u>	Registered Office Address (MUST BE FLORIDA STREET A	<u>DDRESS</u>	2	701 TAS		
เอากับเล	IN INTHUM CALL CONTROL	·	<u> </u>	S T		
Herei Provisio The Obli	FÖRT LÄUDERDALE	33311	رند : مناد :	2018 AUG 19 SECRETARY TALLAHASSE		
25.43:	ROUGIER, CL'AUDE			PH 4: 19 SEE, FLORID		
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office ad	dress:	S S		
41 mm	2125 BISCAYNE BLVD., SUITE 361			11E 19		
11.45. F	NEW Registered Office Address:					
		<del></del>	<u> </u>	•		
	MIAMI, FL_	33137	, 	-		
the cha agent v was/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regi: bility co f the lim	stered office ompany, it is sited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in		
		CL	AUDE RO			
_	ture of a member or authorized representative of a member			Printed or typed name of signee		
I here provisi the obl to mere notified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address. I h I in writing of this change	ee to act perform I for in C ereby c	in this cap ance of my Chapter 602 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been		
Signato	re of Registered AgeM					
5						