## Florida Department of State

**Division of Corporations** Electronic Filing Cover Sheet

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Division of Corporations

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## LLC REGISTERED AGENT CHANGE FLORIDA HOME INSTALLATIONS, LLC

| Certificate of Status | 0       |
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4/7/2016

## **COVER LETTER**

|           | Registration Section Division of Corporations  |                                 |   |  |  |  |
|-----------|--|---------------------------------|---|--|--|--|
| SUBJE     | CT: FLORIDA HOME INSTALLA  | FLORIDA HOME INSTALLATIONS, LLC |   |  |  |  |
|           |  | ne of Limited L                 | iability Company  |  |  |  |
| Dear Sir  | or Madam:  |                                 |   |  |  |  |
| The enc   | losed Registered Agent/Registered Off  | ice Change and                  | fee(s) are submitted for filing.  |  |  |  |
| Please re | eturn all correspondence concerning th   | is matter to the                | following:  |  |  |  |
| Cheye     | enne Moseley   |                                 |   |  |  |  |
|           | Name of Person   |                                 | _   |  |  |  |
| Legalz    | coom.com, Inc.   |                                 |   |  |  |  |
|           | Firm/Company   |                                 |   |  |  |  |
| 101 N.    | . Brand Blvd., 10th Floor  |                                 |   |  |  |  |
|           | Address  |                                 | _   |  |  |  |
| Glenda    | ale, CA 91203  |                                 |   |  |  |  |
|           | City/State and Zip Code  |                                 |   |  |  |  |
| rmagil    | Inhs@gmail.com   |                                 |   |  |  |  |
| E-1       | mail address: (to be used for future and   | nual report notif               | ication)  |  |  |  |
| For furtl | her information concerning this matter,  | , please call:                  |   |  |  |  |
| lmelda    | Vasquez  | 323                             | 962-8600 x7950  |  |  |  |
|           | 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 | Re<br>Di<br>P. C                | AlLING ADDRESS: gistration Section vision of Corporations D. Box 6327 Illuhussee, Florida 32314 |  |  |  |
|           | Enclosed is a check for the following  | amount:                         |   |  |  |  |
|           | □ \$25 Filing Fee  | □ \$5                           | 55 Filing Fee & Certified Copy  |  |  |  |
| INIIS18   | (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. l                                     | Na                              | me of the limited liability company: FLORIDA He  | OME II   | ISTALLA  | TIONS, LLC  |   |   |                          |
|--|---------------------------------|--|--|--|---|---|---|--------------------------|
| 2. (a                                    |                                 |  |  | b)   |   |   |   |                          |
| `  | , .                             | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   |  | ,  | Mailing address of limite<br>(Nate: MAY BE POS  |   |   |                          |
|  |                                 | 5000 NE 5th St. Rd.  |  | 5000 1   | NE 5th St. Rd.  |   |   |                          |
|  |                                 | Ocala, Florida 34470   |  | Ocala,   | Florida 34470   |   |   |                          |
|  |                                 | 03/24/2015   |  | L15000   | 052575  |   |   |                          |
| 3.                                       |                                 | Date of filing/registration in Florida   | 4.   |  | Document number   |   |   |                          |
| 5. (                                     | a)                              | Ryan L Magill  |  |  |   |   |   |                          |
| J. (                                     | ш,                              | Registered Agent and Registered Office shown on the records o  | f the Flori  | la Dept. of S  | ate:  |   |   |                          |
|  |                                 | Registered Office Address (MUST BE FLORIDA STREET  | ADDRES   | <u></u>  |   | <b>&gt;</b>                                 | 201   |                          |
|  |                                 | 5000 NE 5th St. Rd.  |  |  |   | <u></u>                                     | 2016 APR                                    |                          |
|  |                                 | Ocala , F  | L_3447(  | )  | ·   | LEAHASSEE IT                                | **<br>                                      | ŗ                        |
| (Ł                                       | <b>)</b> )                      | United States Corporation Agents, Inc.   |  |  |   |   | PH.   | 1                        |
|  | •                               | Enter name of NEW Registered Agent and/or NEW Registere  | d Office s   | ddress:  |   | Take Section                                | HQ: 03                                      | C                        |
|  |                                 | NEW Registered Office Address:   |  |  | <del></del>   | 7   |   |                          |
|  |                                 | 13302 Winding Oak Court, Suite A   |  |  |   |   |   |                          |
|  |                                 | Tampa , F  | _3361  | 2  |   |   |   |                          |
| the cagen<br>was/                        | ha<br>t v<br>we                 | mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited the authorized by an affirmative vote of the members cles of organization or the operating agreement of the | aws of the reg<br>liability of<br>of the li<br>e limited | e State of I<br>istered off<br>company, inited liabi | ice and the business of<br>t is hereby confirmed<br>lity company or as oth<br>ompany. | ffice of th<br>that the c                   | te regist<br>hange(s)                       | ered<br>)                |
|  |                                 | ure of a member or authorized representative of a member   |  |  | Printed or typed name   |   |   |                          |
| I her<br>prov<br>the o<br>to me<br>notif | rel<br>isi<br>obl<br>ere<br>iec | ov accept the appointment as registered agent and agents of all statutes relative to the proper and completing the graph of my position as registered agent as providity reflect a change in the registered office address, it in writing of this change.  Chayenne Moseley  |  |  |   | e to compiliar with<br>cument is<br>company | ply with<br>a and ac<br>being f.<br>has bee | the<br>cept<br>lled<br>n |
| Sign                                     | alm                             | e of Registered Agent United States Corp   | oration  | Agents,  | ino.<br>. , , , , , , , , , , , , , , , , , ,   |   |   |                          |