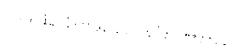
L15000 184169

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JUL 13 2017 J STEVERS

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: Project Farth Pest Control 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:					
Christopher Brill Name of Person	<u></u>				
Project Earth Pest Control					
7041 OVERLOOK Dr. Address					
Ft. Myers F1 33919 City/State and Zip Code					
Projectearth@Comcast.net E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Chastopher Ball at (2)	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				

\$55 Filing Fee & Certified Copy

INHS18 (2/14)

□ \$25 Filing Fee

Enclosed is a check for the following amount:

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: POPCH	Earth Pest	t Control	
2. (a)	7041 Overlook Dr.	OK Dr.		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		ng address of limited liabi ote: MAY BE POST OF I	
	Ft. Myers, F1. 33919	- F4	myers,	FL 337
	1-8-17	L1500	0184169	
3.	Date of filing/registration in Florida	_	cument number	
5. (a)	Registered Agent and Registered Office shown on the records of the		Inc	
	13302 DINCLOS OCKS Registered Office Address MUST BE FLORIDA STREETA	5 Court		
	-Suite A		<u> </u>	. 17
	Tampa .fl	33612	1. 1 流气	S 10 10 10 10 10 10 10 10 10 10 10 10 10
	Christmohar Rich			$\overline{\sim}$
(b)	Enter name of NEW Registered Agent and/or NEW Registered (Office address:		
	7041 OverLook Dr.			7: 25
	NEW Registered Office Address:		The state of the s	
	F4 Myers FL	33919		
If the I	imited liability company is not organized under the law	s of the State of Florida	ı, it is hereby confirm	ned that after
the cha	ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liab	the registered office and bility company, it is her	I the business office (by confirmed that the	of the registered he change(s)
was/w the agt	ere authorized by an affirmative vote of the members of igles of organization or the operating agreement of the l	the limited liability con imited liability compan	mpany or as otherwis y.	se provided in
Signa	ture of a member of authorized representative of a member	<u>Chris</u>	Brill nted or typed name of sign	nee
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	e to act in this capacity performance of my dutie for in Chapter 605, F.S ereby confirm that the l	: I further agree to one of the second I am familiar S. Or, if this docume imited liability comp	comply with the with and accept nt is being filed cany has been
Signati	fre of Registered Agent			

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