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. (Re	equestor's Name)	
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J. HARRIS

COVER LETTER

_	stration Section sion of Corporations		
SUBJECT:		Lawncare f Limited Liability Con	Sorvice LLC.
Dear Sir or I	Madam:		
The enclosed	l Registered Agent/Registered Office	Change and fee(s) are s	submitted for filing.
Please return	all correspondence concerning this n	natter to the following:	
	Name of Person	opez	
Dieg	50 Jimenez Caunce Firm/Company	i 12	
P.0). Box 3345 Address		
_Bo	nita Springs, 12 34. City/State and Zip Code	<u> </u>	
E-mail	address: (to be used for future annual	report notification)	
For further i	nformation concerning this matter, plo	ease call:	
	Name of Person	at (<u>239</u>) <u>2</u> Area Coo	co - 1496 de & Daytime Telephone Number
Reg Divi Clif 266	REET/COURIER ADDRESS: istration Section ision of Corporations ton Building I Executive Center Circle ahassee, Florida 32301	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section orporations 7
Enclosed is a check for the following amount:			
₫ \$	25 Filing Fee	□ \$55 Filing Fe	ee & 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.

rioriae	
1. Na	me of the limited liability company: Diego Jimenez Lawncare Gervice LLC.
2. (a)	(b)
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)
	13520 Bonita Beach Rd.
	Bonita Springs, Fr 34135
	December 04, 2015 L 15000 2030 89
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Cibelle Sandoval Krust
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	-; 57
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	27040 Old 41 Sude 1
	Bonita Springs, FL 34135
(b)	Diego Timenez Lopez Enter name of NEW Registered Agent and/or NEW Registered Office address:
` '	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	13520 Bonita Boarh Rd. NEW Registered Office Address:
	Donita Springs FZ 34135
	.FL
	, , ,
If the li	imited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the cha	inge or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/we	ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the arti	cles of organization or the operating agreement of the limited liability company.
	tue of a member or authorized representative of a member Printed or typed name of signee
Signat	tue of a member Printed or typed name of signee
I herel provisi the obl	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper und complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed
io mere	ely reflect a change in the registered office address, I hereby confirm that the limited liability company has been it in writing for this change.

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