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(Address)	
(City/State/Zip/Phone #)	02/23/2101027001 **25.00
(Business Entity Name)	
(Document Number)	
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COVER LETTER

TO: Registration Section Division of Corporations

TREE SOLUTIONS FLORIDA, LLC

SUBJECT: _

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:

Kimberly Young

Name of Person

Firm/Company

9 Fountainebleau Circle

Address

Daytona Beach, FL 32118

City/State and Zip Code

FILED 1021 FEB 23 AM 11: 20 SECRETARY OF STATE TALLAHASSEE, FL

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

For further information concerning this matter, please call:

Kimberly Young

Name of Person

Mailing Address:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

)	307	441	9

Area Code & Daytime Telephone Number

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Enclosed is a check for the following amount:

□ \$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. N:	ame of the limited liability company: TREE SOLUTI	ONS FLORIDA	A. LLC	
2. (a)	221 Francis Parkman Pl	(b)	Î	
L. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	•
	Apt. #1			
	Daytona Beach, FL 32114			
	03/16/2010	\mathbf{r}	_16000091293	
3. 5. (a)	Date of filing/registration in Florida Brian Weiner	4.	Document number	
J. (u)	Registered Agent and Registered Office shown on the records 9 Fountainebleau Circle	of the Florida Dep	pt. of State:	
	Registered Office Address (MUST BE FLORIDA STREE	<u>TADDRESS)</u>		
	Daytona Beach	FL_32118		A
(b)	Kimberly Young		ARY 23	F
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	<u>red Office addres</u> :		
	9 Fountainebleau Circle		AMII:20	
	NEW Registered Office Address:			
	Daytona Beach	FL_32118		
change agent was/w the art	limited liability company is not organized under the e or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member. icles of organization or the operating agreement of the	he registered of liability compa s of the limited	office and the business office of the register any, it is hereby confirmed that the change d liability company or as otherwise provide	ed (s)
	ature of a member or autorized representative of a member	Kimberly	ly Young	
Signa	nure his member or autorized representative of a member		Printed or typed name of signee	
provis the ob to mer	why accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provid rely reflect a change in the registered office address, d'in writing of this change.	igree to act in t te performance ded for in Chap 1 hereby confir	this capacity. I further agree to comply wit e of my duties, and I am familiar with and a pter 605, F.S. Or, if this document is being rm that the limited liability company has be	h the iccept filed zen

Signature of Registered Agent Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314

FILING FEE: \$25.00