

L16000140441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

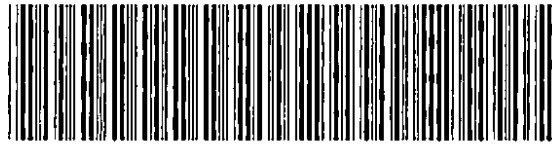
(Document Number)

ed Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900400727889

(3)

JAN 23 AM 11:38

JAN 23 AM 9:44

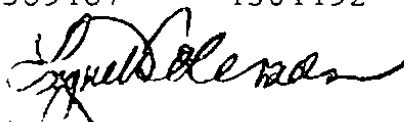
JAN 24 2023

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 389487 4304492

AUTHORIZATION :



COST LIMIT : \$ 25.00

-----  
ORDER DATE : January 23, 2023

ORDER TIME : 10:13 AM

ORDER NO. : 389487-005

CUSTOMER NO: 4304492  
-----

CHANGE OF AGENT

NAME: HUEMAN PEOPLE SOLUTIONS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX \_\_\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

**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.*

Name of the limited liability company: HUEMAN PEOPLE SOLUTIONS, LLC

(a) \_\_\_\_\_

Principal office address of limited liability company:

(Note: MUST BE STREET ADDRESS)

320 1st street north SUITE 101

JACKSONVILLE BEACH, FL 32250 US

(b) \_\_\_\_\_

Mailing address of limited liability company:

(Note: MAY BE POST OFFICE BOX)

Jul 28, 2016

Date of filing/registration in Florida

4.

L16000140441

Document number

(a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

REINHOLD CORPORATION

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1845 TOWN CENTER BLVD., SUITE 105

FLEMING ISLAND, FL 32003

(b) \_\_\_\_\_  
Enter name of NEW Registered Agent and/or NEW Registered Office address:

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

Plantation, FL 33324

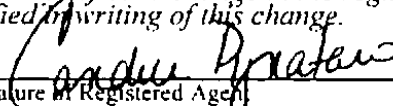
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
Signature of a member or authorized representative of a member

Alia Drissi

Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

 Candice Pignataro Asst. Secretary  
Signature of Registered Agent

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