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Office Use Only



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COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: Dallas Cleaning Services LLC 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:							
Merese DotSey Name of Person							
Dallas Cleaning Services LZC. Firm/Company							
221 SW 43'd LN Address							
Cape Coral 12 33914 City/State and Zip Code							
E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Theresie Dotse (at (305) 743 - 4913 Name of Person Area Code & Daytime Telephone Number							
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314							
Enclosed is a check for the following amount:							
\$25 Filing Fee & Certified Copy							

INHS18 (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.

I. Nat	me of the limited liability company: Dallo-S	- -[envi	va Sa	ruices LL(_	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	221	SW 42 rd failing address of limi (Note: MAY BE PO	ited liability compa	
	Carc Coral, FL 33714	<u> </u>		pe Coral		,
	8/26/2016		<u>L161</u>	000 160°	137	
3.	Date of filing/registration in Florida	4.	I	Document numbe	:r	
(b)	Registered Agent and Registered Office shown on the records of the 2013 W 43" LN Registered Office Address (MUST BE FLORIDA STREET A) Care Coral F1 33914 Care Coral FL Therese Dottory Enter name of NEW Registered Agent and/or NEW Registered Office Address: NEW Registered Office Address:	<u>DDRESS)</u>	1 4		2017 JUL 13 PM 3: 03 SLCKLINRY OF STATE SALLAHASSEE, FLORIDE	TILED
	Cape Goral .FL	739	14			
signat I hereb provisic the oblit to mere notified	mited liability company is not organized under the lawinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the lawing of a member or authorized representative of a member only accept the appointment as registered agent and agreement of all statutes relative to the proper and complete properties of a change in the registered office address, I had in writing of this change.	the register bility complete the limited limited liab	red office pany, it is ed liability com	and the business hereby confirmed v company or as o apany. Printed or typed name active. I further as	office of the red that the change therwise provide the of signee to comply were the complex to comply were the complex to com	gistered ge(s) led in