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(Address)									
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S. PRATHER

COVER LETTER

TO:

TO:	Registration Section Division of Corporations								
SUBJE	Alliance Pest Services LLC	Alliance Pest Services LLC							
		Name of Limited Liability Company							
Dear S	ir or Madam:								
The en	closed Registered Agent/Registered Offic	ce Change and	fee(s) are submitted for filing.						
Please	return all correspondence concerning this	s matter to the	following:						
Fredd	ly W. Rojas								
	Name of Person	 -, -							
Allian	ce Pest Services LLC								
	Firm/Company		-						
3302	Belleville Ter.								
••••	Address	····							
North	Port, FL 34286								
	City/State and Zip Code								
frojas	25@hotmail.com								
Е	-mail address: (to be used for future annu	ial report notif	ication)						
For fur	ther information concerning this matter,	please call:							
Fredd	y W. Rojas	941 at (350-7452						
	Name of Person	(Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Re Di P.C	alLING ADDRESS: gistration Section vision of Corporations D. Box 6327 Hahassee, Florida 32314						
Enclosed is a check for the following amount:									
	☑ \$25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy						
INHS18	3 (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.

1. N	ame of the limited liability company: Alliance Pest	t Servi	ıce	s LLC		 		
2. (a)			(b))	·			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				Mailing address of limite (Note: MAY BE POS	-		
	3302 Belleville Ter.			3302 Be	elleville Ter.			
	North Port, FL 34286			North P	ort, FL 34286			
	November 7, 2016		Į	L160002	03823			
3.	Date of filing/registration in Florida	- 4.	-		Document number			
5. (a)	Freddy W. Rojas							
J. (a)	Registered Agent and Registered Office shown on the records of			Dept, of Sta				
							~	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	最高	200		
	3505 72nd. Dr. E.				_	产品	2	آ"
	Sarasota	L <u>3424</u>	13			五型	<u></u>	5.0
				·	_	3557	2018 OCT -4 PM	The First Sp
(b)	Freddy W. Rojas	1.000			_	LL C	بن	Ĺ
	Enter name of NEW Registered Agent and/or NEW Registered	<u>a Omce</u>	add	ress:		끈됨	5: 42	
						1,1	•	
	NEW Registered Office Address:				_			
	3302 Belleville Ter				•••			
	North Port	2420) C					
	FI	L3428			-			
the cha agent was/w	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the re iability of the l	gis co limi	tered offic mpany, it ited liabili	te and the business of is hereby confirmed to ty company or as oth	ffice of the i that the chai	registe nge(s)	
		F	rec	ddy W. R	<u> </u>			
Signa	ture of a member or authorized representative of a member				Printed or typed name	of signee		
provisi the obt to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change	ree to e e perfoi ed for i hereby	act rma n C	in this cap ince of my hapter 60 infirm that	pacity. I further agre duties, and I am fam 5, F.S. Or, if this doe the limited liability	te to comply niliar with a cument is be company ha	with t nd acc ging fil s been	he ept cd
Signatu	re of Registered Agent							
	Division of Corporations P.O.	Box 63	327	• Tallaha	ssee, FL 32314			

FILING FEE: \$25.00