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(Requestor's Name)		
(Address)		######################################
(Address)	1003574	455291
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)	01/11/2101	013021 +*25
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		2021
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Office Use Only

****25.00**

		COVER	LETTER	
	gistration Section vision of Corporations			
SUBJECT	AAA Home Healthcare Services LL	C		
SUBJECT		ne of Limited I	Liability Company	
Dear Sir or	Madam:			
The enclos	ed Registered Agent/Registered Off	ice Change and	I fee(s) are submitted for filing.	
Please retu	rn all correspondence concerning th	is matter to the	following:	
Kevin Brad	, bury			
	Name of Person			
Kevin Brad	bury			
	Firm/Company		<u> </u>	
238 S.W. PI	noenix Glenn			
	Address	·		
Fort White,	Florida 32038			
	City/State and Zip Code			
aaaautosale	s386@gmail.com			
E-ma	il address: (to be used for future and	nual report noti	fication)	
For further	information concerning this matter	, please call;		
Kevin Brad	bury	352 at (256 2125	
	Name of Person	a. (Area Code & Daytime Telephone Number	
Re Di P.0	ailing Address: gistration Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
En	closed is a check for the following	g amount:		
×	\$25 Filing Fee	- \$	□ \$55 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.

). (a)		(b)		
(-,	Principal office address of limited liability company:		Mailing address o	f limited liability company:
	(Note: MUST BE STREET ADDRESS) 238 SW Phoenix Glenn		_	E POST OFFICE BOX) · PHOENIX GLN.
	-			
	Fort White, FL 32038		J=T. M	4717x, F6, 35038
	1/7/2021	L	17000009	1922
3.	Date of filing/registration in Florida	4.	Document nur	nber
5. (a)	United States Corporation Agents, inc.			
·. ()	Registered Agent and Registered Office shown on the records of	the Florida Dep	t. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	5575 S. Semoran Blvd. Suite 36			
	Orlando , FI	32822		20
		-		1021 JAN
(b)				AN N
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office address	;	· · · · · · · · · · · · · · · · · · ·
	Kevin Bradbury			PH
	NEW Registered Office Address:			ိ ည် ∙ ∙
	238 SW Phoenix Glenn			ယ ယ
	Fort White, FI	32038		
change	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liab	registered of	fice and the business	office of the registered
vas/we	ere authorized by an affirmative vote of the members of	of the limited	liability company or a	as otherwise provided in
he arti	cles of organization or the operating agreement of the			
Signo	ture of a member or authorized representative of a member	Kevin Br	Printed or typed	name of signee
•	by accept the appointment as registered agent and agr	ee to act in t		J
provisi	ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I	performance d for in Chap	of my duties, and I ar ter 605, F.Ş. Or, if th	n familiar with and accept is document is being filed
ne opt o merc	ly reflect a change in the registered office address, I it in writing of this change.	hérehy confir	m that the limited liab	ility company has been