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(Re	equestor's Name)	<u>.</u>						
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PICK-UP	MAIT	MAIL						
(Business Entity Name)								
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Certified Copies	_ Certificates	of Status						
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COVER LETTER

TO:

INHS18 (2/14)

Registration Section

SERVICES, LLC							
Name of Limited Liability Company							
1.C. (A) Lowland For Ellin-							
nge and fee(s) are submitted for filing.							
to the following:							
							
t rt notification)							
call:							
561) 588-2027 - EXT. 224							
Area Code & Daytime Telephone Number							
MAILING ADDRESS:							
Registration Section							
Division of Corporations							
P.O. Box 6327							
Tallahassee, Florida 32314							
t:							
□ \$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.

2. (a) 820 NORTH 4TH STREET Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS) LANTANA, FL 33462-1710 LANTANA, FL 33460-4452 LANTANA, FL 33460-4452 LANTANA, FL 33460-4452 LANTANA, FL 33462-1710	1.	Na	ame of the limited liability company:WEST_SURVE	EY S	ΕF	RVIC	ES,	LI	С						
Principal office address of limited liability company: (Note: MUST RESTREET ADDRESS) LANTANA, FL 33462-1710 3. Date of filing/registration in Florida 4. Document number 5. (a) MORGAN, MARTHA A. Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 318 S. DIXIE HWY., SUITE 4-5 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) LAKE WORTH , FL 33460-4452 (b) MORGAN, MARTHA A. Enter name of NEW Registered Agent and/or NEW Registered Office address: 820 N. 4TH STREET NEW Registered Office Address: LANTANA , FL 33462-1710 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 registere 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	2	(a)	820 NORTH 4TH STREET	(h	•)	820	NO	RTH	4 T	н я	STRE	ET			
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the articles of organization or the operating agreement of the limited liability company.	the	arti	cles of organization or the operating agreement of the lin	nited l	ial	bility (comp	any.	Ç						
MARTHA A. MORGAN	1	N	annali: Morgan	M	AF	AHTS	A.	МО	RGA	N					
Signature of a member or authorized representative of a member Printed or typed name of signee	Si	gnat	ture of a member or authorized representative of a member]	Printe	d or ty	yped	name o	of sign	ee		
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	lh	erel	by accept the appointment as registered agent and agree	to act	in	this c	capac	ity.	I fur	ther	agre	e to c	omply	with	the
the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been	the	obl	igations of my position as registered agent as provided for	or in C	Chi	apter	605,	F.Ş.	Or,	if th	is doc	umei	it is be	ing f	filed
notified in writing of this change.	not	fieg	f in writing of this change.	eoy co	onj	urm (r	iai ir	e iin	шеа	нас	ницу С	.omp	uny na	s vee	eri
Martha U. Morgan															
Signature of Registered Agent MARTHA A. MORGAN	_														

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