

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(Do	ocument Number)			
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COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	Tree21 Services, LLC					
Name of Limited Liability Company						
Dear S	ir or Madam:					
The end	closed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the following:				
Cody	Jones					
-	Name of Person					
Tree2	1 Services LLC					
	Firm/Company					
411 A	tlantis Drive					
	Address					
Satelli	ite Beach, FL 32937					
_	City/State and Zip Code					
tree21	Iservices@gmail.com					
E-	mail address: (to be used for future ann	ual report notification)				
For furt	her information concerning this matter.	please call:				
Cody	Jones	321 795-1420				
	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	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	☐ \$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.

2. (a)	Tree21 Services LLC			
		(b) Tree21 Services LLC		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	411 Atlantis Drive, Satellite Beach, FL 32937		411 At	lantis Drive, Satellite Beach, FL 329
	09/19/2017		L17000	194797
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	LEGALINC CORPORATE SERVICES, INC.			
, ,	Registered Agent and Registered Office shown on the records of the 5237 SUMMERLIN COMMONS			
	Registered Office Address (MUST BE FLORIDA STREET AD: SUITE 400	<u>DRESS</u>	2	三 三 三 一
		 3907		N 26
(b)	Cody Jones		_	FILED 18 NOV 26 AM II: 50 PARCHASSING ALGORID
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Of</u>	<u>fice ado</u>	<u>iress</u> :	
	411 Atlantis Drive			
	NEW Registered Office Address:	_		_
	Satellite Beach FL 32	 2937		_
the chai ngent w was/we	mited liability company is not organized under the laws on the organized under the laws of the organized under the laws of the organized limited liability in the case of a Florida limited liability reauthorized by an affirmative vote of the members of the line of organization or the operating agreement of the line of the line or the operating agreement of the line	e regis lity co ne lim nited li	tered offic mpany, it ited liabili	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
Signat	ure of a member or authorized representative of a member		,, 00,,00	Printed or typed name of signee
he obli o mere	y accept the appointment as registered agent and agree ms of all statutes relative to the proper and complete per gations of my position as registered agent as provided faily reflect a change in the registered office address. I here in writing of this change.	7/11/11/1/	<i>1111/12 7</i> 11 2011	: dutios and Lam tomilion with and account