L17000254160

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2020 JUN 29 AM 10: 42 SECRETARY OF STATE

> D. BRUCE AUG 15 2020

COVER LETTER

Division of Corporations				
REMYFORD RESTORATION SERVICES, LLC SUBJECT:				
Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and f	ee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the fo	ollowing:			
Wesley T. Dunaway, Esq.				
Name of Person	-			
Kovar Law Group				
Firm/Company	_			
618 E. South St., Ste. 500	_			
Address		202		
Orlando, FL 32801	ALLA ALLA	2020 JUN 29		
City/State and Zip Code	- HASS			
E-mail address: (to be used for future annual report notific	man man	AH 10: 42		
E-man address. (to be used for future annual report norms	ation)	-		
For further information concerning this matter, please call:	L.;	\sim		
Wesley T, Dunaway 407 at (603-6652			
Name of Person	Area Code & Daytime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

■ \$25 Filing Fee

Enclosed is a check for the following amount:

Registration Section

TO:

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. Na	ame of the limited liability company: REMYFORD	RESTORATION	N SERVICES, LLC
2 (a)		(b)	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12/12/2017	1.1	17000254160
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	The Bullwark Law Group		
J. (a)	Registered Agent and Registered Office shown on the records 15167 US 331 Business Route		ept. of State:
	Registered Office Address (MUST BE FLORIDA STREE Ste. H	ET ADDRESS)	
	Freeport	32439	202 SE(17
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent </u>	red Office addre	FILED 2020 JUN 29 AM 10: 42 SECRETARY OF STATE TALLAHASSEE, FL
	618 E. South St., Ste. 500		1E 42
	Orlando	FL	
change agent was/w the art	limited liability company is not organized under the cor changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street in the content of the content	the registered of Hiability comp rs of the limited	office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
rissponer /	pher M Retherford Retherland Usin 18, 2020 11 of CDT)	Kris Re	etherford o/b/o LEENDORF MAJOR HOLDING CO.
	ture of a member or authorized representative of a member		Printed or typed name of signee
provis: the ob: to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d in writing of this change.	agree to act in ete performanc ided for in Cha . I hereby confi	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept upter 605, F.S. Or, if this document is being filed irm that the limited liability company has been
Was Duna			
Signati	ire of Registered Agent		