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COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divi	sion of Corporations					
SUBJECT:	Guidi Home Remodeling, LLC					
SOBIECT.	Name of Limited Liability Company					
Dear Sir or N	Madam:					
The enclosed	l Registered Agent/Registered Off	fice Change a	ind fee	e(s) are submitted for filing.		
Please return	all correspondence concerning th	is matter to th	he fol	lowing:		
Daniela G	uidi Oliva					
	Name of Person					
Guidi Hom	ne Remodeling, LLC					
	Firm/Company					
12001 Ava	alon Lake Drive # 302					
	Address					
Orlando F	L 32828					
	City/State and Zip Code					
	VA@GMAIL.COM					
E-mail	address: (to be used for future and	nual report no	tifica	tion)		
For further in	nformation concerning this matter.	please call:				
Daniela G	uidi Oliva	954 at (558-7058		
	Name of Person		٨	area Code & Daytime Telephone Number		
Regi Divi Clift 2661	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle thassee, Florida 32301	; [MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Encl	osed is a check for the following	amount:				
2 \$2	25 Filing Fee	0	\$55 I	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

I. No	ame of the limited liability company: Guidi Home f	Remodeling,	LLC		
2. (a)	12001 Avalon Drive Lake # 302	(b) 120	(h) 12001 Avalon Drive Lake # 302		
2. (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited (Note: MAY BE POST		
	Orlando FL 32828	Orla	ando FL 32828		
	02/19/2018		000044591		
3.	Date of filing/registration in Florida	4.	Document number	_	
5. (a)	Oliva Guidi				
J. (d)	Registered Agent and Registered Office shown on the records of 12001 Avalon Drive Lake # 302	the Florida Dept.	of State:		
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>	; ÷	ं छ	
	Orlando, FI.	32828		Jiji 2	
(b)	Daniela Guidi Oliva				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	•	ي ٠٠	
	1040 NW 185 Terrace			. 2	
	NEW Registered Office Address:				
	Pembroke Pines FL	33029			
the cha agent w was/wc	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liater authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered ability compan of the limited l	office and the business offi y, it is hereby confirmed the ability company or as other	ce of the registered at the change(s)	
Signat	ure of a member or authorized representative of a member		Printed or typed name of	signee	
provision the obli to mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address, I if in writing of this change.	ve to act in thi performance of d for in Chapte hereby confirm	s capacity. I further agree of my duties, and I am famil or 605, F.S. Or, if this docu o that the limited liability co	to comply with the iar with and accept ment is being filed mpany has been	
Signator	re of Registered Agent				