## HT 5000060274

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
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PICK-UP WAIT MAIL						
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(Document Number)						
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CHOMINED

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE : 840068

AUTHORIZATION :

COST LIMIT : \$ 25.0

ORDER DATE: December 16, 2024

ORDER TIME : 11:51 AM

ORDER NO. : 840068-008

CUSTOMER NO: 7681421

\_\_\_\_\_

## CHANGE OF AGENT

NAME: ACE'S GARAGE DOOR REPAIR AND

INSTALLATION, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller -- EXT#

7681421

## 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	me of the limited liability company: ACE'S GARAC	SE DOO!	R I	REPAIR AN	ND INSTALLATION, LLC		
2. (	a)			(b)				
`	, .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		` ′	۸	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
		3334 ARDEN ROAD			3334 ARD	EN ROAD		
		HAYWARD, CA 94545			HAYWARD, CA 94545			
		03/09/2018		Į	_18000060	274		
3.		Date of filing/registration in Florida	4.	_		Document number		
5. (	(a)							
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State ASSURED COMPLIANCE SERVICES, LLC				· :		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
		1615 WOODWARD STREET						
		ORLANDO F	32803			_		
		,	L		<del></del>	<u></u> 2		
(	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>							
				<u>idd</u>	ress:	ARE OF THE		
		Corporation Service Company				TOTALE THE PH 2: 01 SECRETARY SEEF FOR		
		NEW Registered Office Address:						
		1201 Hays Street				70 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		
		Tallahassee F	L_32301					
char ager was/	ige it w /we	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited la ore authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registe liability of of the li	rec cor mi	l office and npany, it is ted liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
/s/ Philip K. Calandrino Ph					K. Caland	frino, Authorized Person		
Sig	gnat	ure of a member or authorized representative of a member				Printed or typed name of signee		
prov the o to m	risie obli rere	oy accept the appointment as registered agent and ag ons of all statutes relative to the proper and complet igations of my position as registered agent as provid by reflect a change in the registered office address, I I in writing of thly change.	gree to a e perforn ed for in hereby	et i na Ci coi	n this capa nce of my a napter 605. nfirm that t	icity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been		
	$\mathcal{L}$		RACE I	Ξ. Ι	KIRBY, AS	SST. VICE PRESIDENT		

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