

L18000 106264

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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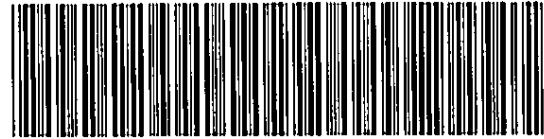
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Humble Host Services LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shirley A Escobar

Name of Person

Humble Host Services, LLC

Firm/Company

9104 SW 152 Path

Address

Miami, FL 33196

City/State and Zip Code

humblehost14@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shirley A Escobar

786

390-2127

at ()

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

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TALLAHASSEE, FLORIDA

**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. Name of the limited liability company: Humble Host Services, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

9104 SW 152 Path

9104 SW 152 Path

Miami, FL 33196

Miami, FL 33196

04/27/2018

L18000106264

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:

Shirley A Escobar

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

9104 SW 152 Path

Miami, FL 33196

(b) Enter name of NEW Registered Agent and NEW Registered Office address:

Shirley A Escobar

NEW Registered Office Address:

180 Hideaway Beach Lane

Kissimmee, FL 34746

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TALLAHASSEE, FLORIDA

(SAME AS MAILING ADDRESS)

180 Hideaway
Beach Lane
Kissimmee, FL
34746

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 registered 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 the articles of organization or the operating agreement of the limited liability company.

Shirley A Escobar
Signature of a member or authorized representative of a member

SHIRLEY A ESCOBAR

Printed or typed name of signer

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 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 notified in writing of this change.

Shirley A Escobar
Signature of Registered Agent