

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Business Linky Warre)				
(2)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



400316639054

DEVERSE BOTHLESS - 112 - 4925, 11

18 AUG -9 PH 4: 55

;"9 9 2018 .. PRATHER

COVER LETTER

TO: Registration Section Division of Corporations							
SUBJECT: MICHAEL	ANTHONY Name of Li	Building mited Liability C	SERVICES, ompany	Lhc.			
Dear Sir or Madam:							
The enclosed Registered Agent/Re	gistered Office Cha	nge and fee(s) are	submitted for file	ling.			
Please return all correspondence co	oncerning this matte	er to the following	<u>;</u> :				
MICHAEL A. Ho)	/ Person						
MICHAEL ANTHONY Firm/Com	Build ING	SERVICES,	LLC.				
7236 PENNSYLVAN	IIA AVE						
SARASOTA, FL 3 City/State and	4243						
Michael hoy 07@ E-mail address: (to be used for		i ort notification)					
For further information concerning	•						
MICHAEL A. HOY	at (_	941 , 81					
Name of Person		Area C	ode & Daytime T	elephone Number			
STREET/COURIER AD Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, Florida 32301	cle	P.O. Box 63	Section Corporations				
Enclosed is a check for the following amount:							
\$25 Filing Fee		S55 Filing	Fee & Certified C	Opy			

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.

1 10//146	'·				
1. Na	me of the limited liability company: $\underline{\mathcal{M}_{ICHAEL}A_{I}}$	NTHONY BUILT	ING SER	PVICES,	LLC
2. (a)	7236 PENNSYLVANIA AVE. SARASOTA FOR Principal office address of limited liability company: 34243	3 Mailing	address of limit	ed liability con	npany: 342
	(Note: MUST BE STREET ADDRESS) 7236 PENNSYLVANIA AVE		e: MAY BE POS PENOVSY		
	SARASOTA, FL 34243	_	TH, FL	•	-
	April 30,2018	41800	01070	64	
3.	Date of filing/registration in Florida 4.	Docu	ıment number		
5 (a)	MICHAEL A. Hoy				
J. (4)	Registered Agent and Registered Office shown on the records of the Flo	orida Dept. of State:			
	7236 PENNSYLVANIA AVE				
	Registered Office Address (MUST BE FLORIDA STREET ADDR	ESS)			
	SARASOTA, FL 34243				
	FI.			35	
	. rt			ن ا	
(b)	Patrick A Steiner			ن	
, , ,	Enter name of NEW Registered Agent and/or NEW Registered Office	address:		72	
	\	A		÷	
	NEW Registered Office Address:	ana De		. S	
	3				
	Sarasota FL	34243			
the chai agent w was/we	mited liability company is not organized under the laws of age or changes are made, the Florida street address of the reill be identical. Or, in the case of a Florida limited liability re authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the limited	egistered office and (y company, it is here limited liability com	the business o by confirmed pany or as oth	ffice of the i that the chai	registered nge(s)
Cian in	Mich Son	_Michae		1	
Signati	are of a member or authorized representative of a member	Printe	d or typed name	of signee	

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.

Signature of Registered Agent