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COVER LETTER

Division of Corporations	
SUBJECT: Veteran Protect	ive Services LLC
	Name of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/I	Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence	concerning this matter to the following:
Tina Nixon	
Name of	Person
Veteran Protective Service	S
Firm/Co	mpany
2182 Durell Lane	
Addre	SS .
Navarre, FL 32566	
City/State a	nd Zip Code
Tina.vps2019@gmail.com	
E-mail address: (to be used	for future annual report notification)
For further information concerni	ng this matter, please call:
William Nixon	732 547-9917
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, Florida 323	Registration Section Division of Corporations P.O. Box 6327 Circle Tallahassee, Florida 32314
Enclosed is a check for	the following amount:
≥ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

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. N	ame of the limited liability company: Veteran Prote	ective	Se	rvices Ll	LC			_
2. (a)	William Nixon	((b) Wiliam Nixon					
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compa (Note: MAY BE POST OFFICE BO)					
	3362 Indian Hills Drive			3362 Ind	dian Hills Drive	е		
	Pace, FL 32571			Pace, Fl	L 32571			_
	06/14/2018		Ĺ	.1800014	16948			
3.	Date of filing/registration in Florida	4.	_		Document num	ber		
5. (a	United States Corporation Agents, INC							
J. (a	Registered Agent and Registered Office shown on the records of	the Flori	da	Dept. of State	- c:			
	United States Corporation Agents, INC							
	Registered Office Address (MUST BE FLORIDA STREET	-						
	13302 Winding Oak Court		F.00					
	Tampa , FL	33612	2	•	_	H: 17	19 JUN	
(b)	Tina Nixon				_	ISSA Yasa	0 1	
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ıdd	ress:		· · · · ·	Po L	E D
	Tina Nixon				_	FEORIDA FEORIA	AM III 07	Ü
	NEW Registered Office Address:					0 A	7	
	2182 Durell Lane				-			
	Navarre , FL	32566	6	<u>.</u>	_			
the chagent was/w	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- tere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the ature of a member or authorized representative of a member	f the reg ability of of the li- limited	gist cor mi I li	ered office npany, it is ted liability	e and the busines s hereby confirm y company or as npany.	ss office ned that otherw	of the the ch ise pro	e registered ange(s)
I here provis the obtone notifie	eby accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I are writing of this change.	ree to a perfori d for in hereby	ct ma co	in this cap nce of my i hapter 603 nfirm that	acity I further i	aoree ta	comn	ly with the and accept being filed has been