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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations				
SUBJE	RAPID & FOCUSED SOLUTIONS L	LC.			
		Name of Limited Liability Company			
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning this	matter to the following:			
ROBEI	RT VASQUEZ JR				
	Name of Person				
RAPID	& FOCUSED SOLUTIONS LLC.				
	Firm/Company				
6808 S	COURT DR				
	Address				
ТАМР.	A FL 33611				
	City/State and Zip Code				
rvasque	ezjr@rapidfocusedsolutions.com				
Е	-mail address: (to be used for future annua	l report notification)			
For fur	ther information concerning this matter, pl	ease call:			
RROBI	ERT VASQUEZ JR	813 808.3700 at ()			
	Name of Person	Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following an	nount:			
	☐ \$25 Filing Fee	■ \$55 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.

2. (a))
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6808 S COURT DR		6808 S COURT DR
	TAMPA, FLORIDA 33611		TAMPA, FLORIDA 33611
	August 23, 2018	1	L18000202092
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
` '	Registered Agent and Registered Office shown on the record	ds of the Florida	Dept. of State:
	UNITED STATES CORPORATION AGENTS, INC	· · · · · · · · · · · · · · · · · · ·	
	Registered Office Address (MUST BE FLORIDA STRI 13302 WINDING OAK COURT	<u>EET ADDRESS)</u>	!
	TAMPA	33612	
		, 1° k.,	
(b)			2021 AUG 19 P
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	tered Office add	iress:
	Adriannette Williams		
	NEW Registered Office Address:		: 06
	2810 North H Street	<u>-</u>	
	Pensacola	, FL_32501	
change igent v was/we	or changes are made, the Florida street address of yill be identical. Or, in the case of a Florida limite	f the registered ed liability cor ers of the limi	mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
	Klengh	Robe	ert Vasquez Jr
_	ture of a member or authorized representative of a member		Printed or typed name of signee in this capacity. I further agree to comply with the

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

Adriannette Williams,

Signature of Registered Agent

COVER LETTER

. .

INHS18 (2/14)

Registration Section

TO:

Divi	sion of Corporations				
SUBJECT:	RAPID & FOCUSED SOLU	TIONS LLC.			
	Name of Limited Liability Company				
Dear Sir or N	Madam:				
The enclosed	d Registered Agent/Register	red Office Change and	fee(s) are submitted for filing.		
Please returr	n all correspondence concern	ning this matter to the	following:		
ROBERT VA	ASQUEZ JR				
	Name of Persor)			
RAPID & FC	CUSED SOLUTIONS LLC.				
	Firm/Company		_		
6808 S COUI	RT DR				
	Address				
TAMPA FL	33611				
	City/State and Zip (Code			
rvasquezjr@r	apidfocusedsolutions.com				
E-mail	address: (to be used for futi	are annual report notif	ication)		
For further in	nformation concerning this	matter, please call:			
RROBERT V	'ASQUEZ JR	813 at (808.3700		
	Name of Person		Area Code & Daytime Telephone Number		
Reg Divi P.O.	ling Address: istration Section ision of Corporations Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Encl	losed is a check for the foll	owing amount:			
Q \$2	25 Filing Fee	■ \$	55 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.

lame of the limited liability company: RAPID & FOC	USED SOLUTIONS LLC.
)	(b)
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
6808 S COURT DR	6808 S COURT DR
TAMPA, FLORIDA 33611	TAMPA, FLORIDA 33611
August 23, 2018	L18000202092
Date of filing/registration in Florida	4. Document number
)	
Registered Agent and Registered Office shown on the records	of the Florida Dept. of State:
UNITED STATES CORPORATION AGENTS, INC.	
Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)
13302 WINDING OAK COURT	024
TAMPA	ed Office address:
, 1	1L
)	
Enter name of NEW Registered Agent and/or NEW Register	ed Office address:
Adriannette Williams	
NEW Registered Office Address:	
2810 North H Street	
Pensacola	32501
ye or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the address of a member or authorized representative of a member	Robert Vasquez Jr Printed or typed name of signee gree to act in this capacity. I further agree to comply with the

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

Signature of Registered Agent