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I ALBRITTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:	ns LLC
	Name of Limited Liability Company
Dear Sir or Madam:	Company
The same	
ine enclosed Registered Agent/Registe	ered Office Change and fee(s) are submitted for filing.
Please return all correspondence concer	ming this matter to the following:
Randy Finch	
Name of Person	1
	•
Trusted Roof Solutions LLC	:
Firm/Company	
11849 S US Hwy 41	
Address	
Gibsonton, FI 33534	
City/State and Zip Co	ode
Randy@trustedroofsolutions.com	
E-mail address: (to be used for futur	re annual report notification)
For further information concerning this ma	
Randy Finch	407 725-2546
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS	
Registration Section	""" ADDRESS:
Division of Corporations	Registration Section Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the follow	ving amount:
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	5 State 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

(a)	D		.4			1
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)	Mailing ad	dress of limited liability company
	11849 S US Hwy 41			11849	<u>ا ۱۳۵۲:</u> S US Hv	MAY BE POST OFFICE BOX
	Gibsonton FL 33534				ton FL 3	
	12/26/2018		1	_190000	00000	
•	Date of filing/registration in Florida	 4.				nt number
. (a)						•
	Registered Agent and Registered Office shown on the records Kail, Rebecca	of the Flo	rida I	Dept. of Stat	te:	
	Registered Office Address MUST BE FLORIDA STREE	T 40004			_	,
	11849 S US Hwy 41	LAVVKE				1
			_		_	
	Gibsonton FL	335	34		_	1 1 T
		L			-	
(b) _						1
						
-	Enter name of NEW Registered Agent and/or NEW Registers	d Office				
Ē	Enter name of NEW Registered Agent and/or NEW Registers	d Office	addri			SSECTION 1
Ē	Enter name of NEW Registered Agent and/or NEW Registers Finch, Randy	d Office	addri	17. :		WATER THE
F		d Office	addr	23 :	•	11 PAIR: 43
F	Finch, Randy NEW Registered Office Address:	d Office	eddry	<u></u>		2019 JAN 11 PAIR: 43 SECULL WASSEL, FLOWIDS
F	Finch, Randy	d Office	eddra	<u>m:</u> :	•	1 PAIR: 43
- F	Finch, Randy NEW Registered Office Address: 11849 S US Hwy 41			m:		MAN 12: 43
	Finch, Randy NEW Registered Office Address: 11849 S US Hwy 41	3353		<u>m:</u> :		MAN 12: 43
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FILING FEE: \$25.00