L19000012020

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COVER LETTER

TO: Registration Section Division of Corporatio	ns			
JA PLUS SER SUBJECT:	VICES			
SUBJECT:Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent.	Registered Office Change and fee(s) are submitted for filing.			
	e concerning this matter to the following:			
JENNIFER AUGUSTIN				
Name o	of Person			
Firm/Co	ompany			
1130 IMPERIAL LAKE RD				
Addre	ess			
WEST PALM BEACH FL.	33413			
City/State a	nd Zip Code			
AUGUS-J@HOTMAIL.CO	M			
E-mail address: (to be used	for future annual report notification)			
For further information concerni	ng this matter, please call:			
Jennifer Augustin	561 531-6723			
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 Tallahassee, Florida 32314			
Enclosed is a check for	the following amount:			
	☐ \$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. Na	ame of the fimited liability company:	RVICES LLC
2. (a)	7750 Ockeechobee BLV	7750 Ockeechobee BLV
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 4-753	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 4-753
	West Palm Beach, FL 33411	West Palm Beach, FL 33411
	January 10th, 2018	L19000012020
3. 5. (a)	Date of filing/registration in Florida Jennifer Augustin	4. Document number
J. (a)	Registered Agent and Registered Office shown on the records of The United States Corporate Agents inc	
	Registered Office Address (MUST BE FLORIDA STREET 13302 Winding Oak CT suit A	ADDRESS)
	Tampa . Fi	
(h)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Jennifer Augustin	10ffice address: 2 8
	NEW Registered Office Address:	
	7750 Ockeechobee BLV	
	West Palm Beach	33411
Signate A hereborovision of the obling to mere	rill be identical. Or, in the case of a Florida limited live authorized by an affirmative vote of the members of the of a pregnantization or the operating agreement of the upon of a preparation of the operative of a member of a preparative of a member of accept the appointment as registered agent and agriful statutes relative to the proper and complete gations of my position as registered agent as provide	ws of the State of Florida, it is hereby confirmed that after if the registered office and the business office of the registered ability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in limited liability company. Jennifer Augustin Printed or typed name of signee ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept d for in Chapter 605, F.S. Or, if this document is being filed thereby confirm that the limited liability company has been