1190000 14070

(Re	equestor's Name)	-			
(Ad	dress)				
(Ad	dress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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COVER LETTER

TO:

INHS18 (2/14)

TO: Registration Section Division of Corporations	•
HICHEZ HOME SERVICES	LLC
	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	ice Change and fec(s) are submitted for filing.
Please return all correspondence concerning this	is matter to the following:
FRANKLIN HICHEZ	
Name of Person	
HICHEZ HOME SERVICES LLC	
Firm/Company	
421 SW 25TH TERRACE	
Address	
FORT LAUDERDALE FL 33312	
City/State and Zip Code	
FRANKLINHICHEZG@GMAIL.COM	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter,	please call:
FRANKLIN HICHEZ	954 663-8879
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	amount:
S25 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)	421 SW 25TH TERRACE FORT LAUDE	(t))		E FORT LAUDER
	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	<u></u>		Mailing address of limi (Note: MAY BE PO	
_	01/05/2019		L190000	14070	
3. 5. (a)	Date of filing/registration in Florida GAUDY BRICENO	4.		Document number	•
\.' ,	Registered Agent and Registered Office shown on the reco 3901 W STATE ROAD 84 Registered Office Address (MUST BE FLORIDA STR			- v: -	
	DAVIE	, FL 33312		-	
(b)	FRANKLIN HICHEZ			-	• 5.
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	stered Office add	dress:		
	421 SW 25TH TERRACE				
	NEW Registered Office Address:				
	FORT LAUDERDALE	, FL 33312		•	과 동네 경
he cha gent w vas/we	mited liability company is not organized under the nge or changes are made, the Florida street addrewill be identical. Or, in the case of a Florida limit are authorized by an affirmative vote of the members of organization of the operating agreement of	ss of the regis ed liability co ers of the lim f the limited l	stered office impany, it is ited liability iability com	and the business of thereby confirmed y company or as oth pany.	ffice of the registered that the change(s)
		GAL	JDY BRIC	CENO	
£*:	ure of a member or authorized representative of a member			Printed or typed name	a Caliman

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00

Signature of Regis