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C Kiuzei Mr 20 JOSI

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: CNG Cleaning Compo	ing LLC pility Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fe	e(s) are submitted for filing.
Please return all correspondence concerning this matter to the following	llowing:
Shirty J Rayano Name of Person	-
CNG Cleaning Company LLC Firm/Company	-
5420 QUEENSHIP Ct Address	-
Greenacres Fl 33463 City/State and Zip Code	-
Creaning Company, 90 @ gmail E-mail address: (to be used for fature annual report notification of the company of the gmail address).	(OM iion)
For further information concerning this matter, please call:	
Shirty J Payano at (561 Name of Person) 969 8516 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

☐ \$55 Filing Fee & Certified Copy

🛚 \$25 Filing Fee

Enclosed is a check for the following amount:

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 2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Cleaning (b)	Mailing address of limited (Note: MAY BE POST	
3.	S420 QUIENShip Ct Grencius FL 33463 June 23; 2021 Date of filing/registration in Florida		900016 536 Document number	<u>14</u>
5. (a)	Registered Agent and Registered Office shown on the records of S420 QVIEDShip C+ Registered Office Address (MUST BE FLORIDA STREET) Grencus FI		State:	2021 CH 12 MH
(b)	Shirly J Payano Enter name of NEW Registered Agent and/or NEW Registered SH2O QUENTIP CT NEW Registered Office Address:	d Office address:		4 > 27
	Greenacre> . Fi	33463	<u> </u>	
change agent v was/we the arti	imited liability company is not organized under the large or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the way where the cless of a member of a member.	e registered office ability company, i of the limited liabi climited liability c	and the business office of it is hereby confirmed that if ity company or as other ompany.	of the registered at the change(s)
provisi the obl to mere	by accept the appointment as registered agent and aging of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of his change.	ree to act in this co performance of m d för in Chapter 6 hereby confirm the O	apacity. I further agree in duties, and I am famili 505, F.S. Or, if this docu at the limited liability co.	o comply with the ar with and accept ment is being filed mpany has been