## LZO 000094239

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1/5/20

## **COVER LETTER**

TO: Registration Section Division of Corporations	•
SUBJECT: Mobile Hose + Hydrau Name of Limited Li	ability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and	fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	following:
Melissa Sevafini Name of Person	
Mobile twice + Hydraulis, wc	<del></del>
3378 JE DIXIYE HTWY Address	
Shurt FL 34997 City/State and Zip Code	
E-mail address: (to be used for fature annual report notifi	cation)
For further information concerning this matter, please call:	
Melistr Seratini at (7)2  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 amount:	

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

## 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.

I. Na	Name of the limited liability company: Mobile Hose, Hydraulis	ИС
2. (a)	(a) * New principal address (b) * New mail	ne addres
` , ,	Principal office address of limited liability company: Mailing address	of limited liability company: BE POST OFFICE BOX)
	10830 SW Green Ridge lane 10830 SW Gre	in Ridge, Lane
	Palm (ity, FC 34990' Run City, E	L 34990
	4/1/2020 12000009	4239
3.	Date of filing/registration in Florida 4. Document n	umber
5. (a)	(a) Dennis M. Sera-fini	
·	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	
	3373 JE VIXIE Huy	
	Styart FI 24997	
(b)	(b) (Same)	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:	
يلا	NEW Registered Office Address:	
#P		
	10830 SW Even Ridge land	
	Palm (ity FL 34990	
If the li	the limited liability company is not organized under the laws of the State of Florida, it is her	eby confirmed that after the
change	lange or changes are made, the Florida street address of the registered office and the busines.	s office of the registered
was/we	ent will be identical. Or, in the case of a Florida limited liability company, it is hereby conf as/were authorized by an affirmative vote of the members of the limited liability company or	
the arti	e articles of organization or the operating agreement of the limited liability company.	<i>A</i> :
Signat	Melina Sera Signature of a member or authorized representative of a member Printed or type	ήη,
_		_
provision the obli to mere	hereby accept the appointment as registered agent and agree to act in this capacity. I further ovisions of all statutes relative to the proper and complete performance of my duties, and I depended for in Chapter 605, F.S. Or, if the merely refect a diameter in the registered agent as provided for in Chapter 605, F.S. Or, if the merely refect a diameter in the registered affice address. I hereby confirm that the limited lies of the change of this change in the sequence of the confirmation of the change	er agree to comply with the am familiar with and accept this document is being filed ability company has been

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