Division of Corporations



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803

Fax Number : (813)436-5206

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:	

## LLC REGISTERED AGENT CHANGE 1-STOP HOME INSPECTION SERVICES LLC

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K. SALY

From: Registered Agents Inc.

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

To: 18506176383

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	nne of the limited liability company:	pection Serv	rvices LLC
2 (	. ì		(b)	o)
2. (d)		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
			<del></del> -	
		06/22/20	L	L20000172142
3.		Date of filing/registration in Florida	4.	Document number
5. (	ลโ	UNITED STATES CORPORATION AGENTS, INC.		
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida D	1 Dept. of State.	
		Registered Office Address (MUST BE FLORIDA STREET)	<u>.                                    </u>	
		476 RIVERSIDE AVE.		a. 2
		JACKSONVILLE	32202	
(1	b)	Registered Agents Inc		dress:
•	. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addr	dress:
		7901 4th St N		dress:
		NEW Registered Office Address:		
	STE 300		<del></del>	
		St. Petersburg	33702	
the dager was the a	cha it v we irtí	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li- are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the registe iability con of the limit	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
		Reducer Jessey ture of a member or authorized representative of a member	Robin	in Jones
				Printed or typed name of signee
prov the o to m	isi obl ere	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I fin writing of this change.  David Roberts - Assistant S	e performan ed for in Ch hereby con	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
		_ =	•	

Signature of Registered Agent