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(Requestor's Name)								
(Address)								
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(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
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Office Use Only



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## **COVER LETTER**

	Legistration Section Division of Corporations		
SUBJEC	ALL KLEAN UP PROPERTY MA	ANAGEMENT	
		ame of Limited Li	ability Company
Dear Sir	or Madam:		
The enclo	osed Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.
Please ret	urn all correspondence concerning t	his matter to the f	following:
AshleyAn	n Olyphant		
	Name of Person		<del></del>
ALL KLE	AN UP PROPERTY MANAGEMENT	,	
	Firm/Company		<del></del>
2767 Char	tres Ave		
	Address		
Mełbourno	e, Florida, 32935		
_	City/State and Zip Code		
allkleanup	@gmail.com		
E-m	ail address: (to be used for future ar	mual report notific	cation)
For furthe	r information concerning this matte	r, please call:	
AshleyAnı	n Olyphant	321 at (	258-6285
	Name of Person		Area Code & Daytime Telephone Number
R D P	lailing Address: egistration Section ivision of Corporations O. Box 6327 allahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
E	nclosed is a check for the followin	g amount:	
	\$25 Filing Fee	<b>3</b> \$5:	5 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.

ı)	Cynthia L Jordan		(b)	Cynthia L.	Jordan	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)			ss of limited liability company:  Y BE POST OFFICE BOX)
	1282 Randy Ave SE			1282 Randy	y Ave SE	
	Palm Bay, FL, 32909			Palm Bay, I	FL, 32909	
	July 7, 2020		L	.200001932	29.	
	Date of filing/registration in Florida	4.	_		Document	number
1)	Cynthia L Jordan					
	Registered Agent and Registered Office shown on the records of	the Floric	la [	Dept. of State:	:	202
	Cynthia L Jordan					
	Registered Office Address (MUST BE FLORIDA STREET.	1DDRES	<u>(S)</u>			
	1282 Randy AVE Se					
	Palm Bay . FL	32909		<del></del>		2021 HAY 14 AM IO: 15
	AshleyAnn Olyphant					13.75 1.05 1.05
) _	· · · · · · · · · · · · · · · · · · ·					>
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>dd</u> r	' <u>ess</u> ;		
	AshleyAnn Olyphant					
	NEW Registered Office Address:			<del></del>		
	2767 Chartres Ave					
	Melbourne	32935				
	, FL	24733				
lir	nited liability company is not organized under the law	s of the	: Si	tate of Flor	ida, it is he	reby confirmed that after th
. (	or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited lia	register	ed.	office and	the busine	ss office of the registered
CI	c authorized by an affirmative vote of the members of	t the lin	nite	ed liability.	company o	or as otherwise provided in
uc u	les of organization or the operating agreement of the	imited	lial	bility comp	any.	·
И	ry of a member of authorized representative of a member	Cyn 	thi	a L Jordan	n / -	
دے عالہ	y or a memory or aumorized representative of a memori			ŀ	Printed or typ	ed name of signee
	e accept the appointment as registered agent and agre					

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

INHS18 (2/14)