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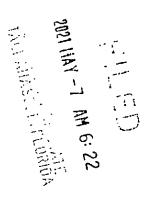
(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	
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## **COVER LETTER**

	istration Section ision of Corporations		
SUBJECT:			
		Name of Limited I	Liability Company
Dear Sir or f	Madam:		
The enclosed	d Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.
Please return	n all correspondence concernin	g this matter to the	following:
Riley G West			
	Name of Person		
Slingin Hose	Mobile Detailing, LLC		
· · - · · - · · · · · · · · · · · ·	Firm/Company		<del></del>
1836 16th Av	renue SW		
	Address		
Vero Beach, I	FL 32962		
	City/State and Zip Coo	le	- <del>-</del>
slinginhosede	tailing@gmail.com		
E-mail	address; (to be used for future	annual report notif	ication)
For further in	nformation concerning this ma	tter, please call:	
Riley G West		772 at (	643-4806
	Name of Person		Area Code & Daytime Telephone Number
Reg Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassec, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303
Encl	osed is a check for the follow	ing amount:	
■ \$2	25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy
INHS18 (2/14	)		

## 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.

Na	me of the limited liability company:  Slingin Hose Mob	oile Detailing, l	.L.C		_	
(a)	1836 16th Avenue SW, Vero Beach, FL 32962	(b) 183	36 16th Avenue SW,	Vero Bea	ch, FL 3	2962
<b>u</b> ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
	08/27/2020		00267923	<u> </u>		
	Date of filing/registration in Florida	- <u>-</u> -	Document i			
	Nicole G Noll					
a)	Registered Agent and Registered Office shown on the records of	the Florida Dept	, of State:			
	1836 16th Avenue SW					
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)				
	Vero Beach FI	32962		=1.	2021 HAY	
	,			M. SIA SA		-1
9)	Riley G West	· <del></del>	<del></del>	<u></u>	Y - 7	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address				; 
	1836 16th Avenue SW				AH.	· - <del>- :</del>
	NEW Registered Office Address:				6: 2	`•
				0 jy	~	
	Vero Beach	32962				
	, FL	·				
:    Ge	imited liability company is not organized under the law or changes are made, the Florida street address of the	ws of the State	of Florida, it is he	reby con	tirmed of the re	that after
ĺν	vill be identical. Or, in the case of a Florida limited lia	ability compar	ny, it is hereby con	firmed th	iat the c	hange(s)
riji	ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	imited liabili	ty company.	or as ome	rwise p	iovidea
ク	porhice (). I \ oll	Bernice N	Noll			
nai	ture of a member or authorized representative of a member		Printed or typ	ed name o	f signee	
isi bli ere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I l Lin writing of this change.	ree to act in the performance d for in Chapt hereby confiri	is capacity. I furth of my dutics, and I er 605, F.S. Or, if n that the limited l	er agree am famil this doci iability co	to com liar with ament is ompany	ply with h and acc s being fi has beei
1	of Registered Agent					