## LZ1 0000 49695

(Re	questor's Name)	
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## COVER LETTER

TO: Registration Section Division of Corporations							
Add Mildred Myers C as registered agent for b	pank						
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	to the following:						
Mildred Myers							
Name of Person							
Phill-Am Service LLC							
Firm/Company							
1303 PleasantviewDr.							
Address							
Apopka Florida 32703							
City/State and Zip Code							
rm32909@yahoo.com							
E-mail address: (to be used for future annual report	rt notification)						
For further information concerning this matter, please e	all:						
Mildred Myers C 33	427 6056						
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						
Enclosed is a check for the following amount	Tallahassee, FL 32303						
☐ \$25 Filing Fee	☐ \$55 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.

1. Na	ame of the limited liability company:  Phill-Am Sercive	s LLC					
2. (a)	Mildred Myers C		(h)	Mildred	Myers C		
2. (a)	Principal office address of fimited liability company:  (Note: MUST BE STREET ADDRESS)	<u> </u>	(**)			ss of limited liability  Y BE POST OFFICE	
	1303 Pleasantview Dr.			303 Plea	asantview Dr.		
	Apopka Floida 32703	<del></del>	;	ipopka F	lorida 32703		
	01/27/2021		L	21000049	9695		
3.	Date of filing/registration in Florida	4.			Document i	number	
5. (a)	Mildred Myters						
<i>J.</i> ( <b>L</b> )	Registered Agent and Registered Office shown on the records of Mildred Myers C	the Flori	da E	ept. of St	ate:	<b>-</b>	
	Registered Office Address (MUST BE FLORIDA STREET  1303 Pleasantview DR	ADDRE.	SS)			SUĞUL FAR 19 SUĞUL FAR Y ALLAHASSE	
	apopka, Fl	L_32703			<del></del>	ASSE	5 1
(b)	Mildred Myers C					ZI FIAK IY AM 4: UU LAHASSEE, FLORIDA	
(-,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office	addr	ess:			>
	Mildred Myers					A. C	)
	NEW Registered Office Address:						
	1303 Pleasantview Dr.						
	Apopka, F]	L 32703					
change agent v was/we the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members licles of organization or the operating agreement of the ture of a member or authorized representative of a member	e registe lability of of the li e limited	red com mit l lia	office a pany, it ed liabil	ind the busine is hereby contity company ompany.	ess office of the r afirmed that the	registered change(s)
I here provisi the obl to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	rce to a performed för in hereby	ct ii naii Ch con	this cap ce of my apter 60 firm that	pacity. I furti y duties, and l 95, F.S. Or, i u the limited I	her agree to con l am familiar wi f this document i iability company	iply with the th and accept is being filed to has been
Signatu	ire of Registered Agent						

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