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(((H21000079137 3)))



H210000791373ABC/

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : INCORP SERVICES INC

Account Number : 120120000007

: (702)866-2500

Fax Number

: (702)866-2689

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

Email Address:

Documents@incorp.com

LLC REGISTERED AGENT CHANGE RAMNEA CLEANING SERVICES LLC

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COVER LETTER

TO:	Registration Section Division of Corporations					
	JECT:					
อกซาเ						
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.				
Please	return all correspondence concerning this matter	to the following:				
	Jackie DeFilippis					
	Name of Person					
	InCorp Services, Inc.					
	Firm/Company					
	3773 Howard Hughes Pkwy. · Suite 5005					
	Address					
	Las Vegas, NV 89169-6014					
	City/State and Zip Code					
	Documents@incorp.com					
	e-mail address: (to be used for future annual repo	rt notification)				
For fu	rther information concerning this matter, please c	all:				
Jacki	e DeFilippis/ InCorp Services, Inc.	(702) 866-2500 Ext. 6915				
	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	::				
	\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				
INH\$1	8 (2/14)	H21000079137 3				

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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	me of the limited liability company: RAMNEA CLEA	MIN	SERVICES	S LLC	
2.	(a)			(b)	A	
	(-) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	,	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	y:
		3019 BRENTON MANOR LOOP		3019 BRE	NTON MANOR LOOP	
		Winter Haven, FL 33881	_	Winter Ha	ven, FL 33881	
		02/15/2021		L2100007	5539 	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	ROSA, RAMON A			_	
	` ′	Registered Agent and Registered Office shown on the records of th	e Flor	ida Dept. of State	- ė :	
		3019 Brenton Manor Loop			_	
		Registered Office Address (MUST BE FLORIDA STREET A	DDRE	<u>SS)</u>		
		Winter Haven		33881	•	
		winter Haven , FL_			-	
	(b)	InCorp Services, Inc.				
	(0)	Enter name of NEW Registered Agent and/or NEW Registered (Office	address:	-	
					10	
		17888 67th Court North			·	
		NEW Registered Office Address:			C	
					- S	
					•	
		Loxahatchee, FL_		33470	- - - - -	
the ag wa the	ent v ent v is/we arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law or a member or authorized representative of a member	the rebility f the l	gistered offic company, it i imited liabilit	orida, it is hereby confirmed that as e and the business office of the reg is hereby confirmed that the change ty company or as otherwise provide mpany.	istered (s)
prothe to no	here ovisi e obl mer	by accept the appointment as registered agent and agree on of all statutes relative to the proper and complete parties of any position as registered agent as provided by reflect a change in the registered office address, I have a light of this change. Isabel Burgos on behamage.			pacity. I further agree to comply we duties, and I am familiar with and 5, F.S. Or, if this document is bein the limited liability company has b	ith the accept g filed seen