121000214352

(Re	questor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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08/16/21--01014--025 **25.00





COVER LETTER

TO:

INHS18 (2/14)

Registration Section

Divis	sion of Corporations				
	Royalty Property Maintenance, LLC				
SUBJECT:	Name of Limited Liability Company				
Dear Sir or M	fadam:				
The enclosed	Registered Agent/Registered Office Chang	c and fee(s) are submitted for filing.			
Please return	all correspondence concerning this matter	o the following:			
_ ly	Name of Person				
- Ro	Hally Property Main Firm/Company	though LLC			
<u>30P</u>	Address				
Zegh	City/State and Zip Code				
Roy E-mail	alty proporty main knows @ address: (to be used for future annual repor	notification)			
For further in	nformation concerning this matter, please ca	11:			
<u>Ly</u> r	Name of Person	N3 7135025 Area Code & Daytime Telepho	ne Number		
Regi Divi P.O.	ling Address: estration Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suit Tallahassee, FL 32303			
Encl	osed is a check for the following amount				
\$2	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.

TO A DS JURD NO Jeographics of SSS	12	69	08 20th St Zephyrhills	. FL 33542
6908 20th St Zephyrhills, FL 335	₹ £	41.3		
Principal office address of lir (Note: MUST BE STE				of limited liability company <i>BE POST OFFICE BOX</i>)
5/6/21			000214352	
Date of filing/registra Lynn Gross	tion in Florida	4.	Document n	umber
Registered Agent and Registered Off 6908 20th St	ice shown on the records	of the Florida Dep	A. of State:	
Registered Office Address (MUS	T BE FLORIDA STREE	T ADDRESS)		
Zephyrhills,		33542 FL		202 1
Alexander M. Morales				17 1 L 2021 AUG 1 6
Enter name of NEW Registered Age	ent and/or NEW Register	red Office addres	5.	< ත [™]
6908 20th St				AH 7:07 OF STATE SSEE, FL
NEW Registered Office Address:				NO7
Zephyrhills		33542 FL		
imited liability company is not or changes are made, the Flori vill be identical. Or, in the case ore authorized by an affirmative cles of organization or the oper	da street address of the of a Florida limited to vote of the member rating agreement of the street o	he registered or liability compa s of the limited	ffice and the business my, it is hereby conf- liability company of lity company.	s office of the registered irmed that the change(s
ture of a member or authorized representation	entative of a member		Printed or type	ed name of signee
				er agree to comply with