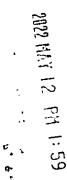


(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Busiless Lifety Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





US/12/22--01008--008 ★★25.00





COVER LETTER

TO: Registration Section

Divi	sion of Corporations				
SUBJECT:	Cleaning Maid 4 You Name of Limited Liability Company				
SOBJECT.					
Dear Sir or N	Madam:				
The enclosed	I Registered Agent/Registered Office	Change ar	nd fee(s) are submitted for filing.		
Please return	all correspondence concerning this m	atter to th	e following:		
Song Li					
•	Name of Person				
Cleaning Mai	id 4 You				
	Firm/Company		ader a commun.		
1427 Sand lal	ke cir				
	Address		 -		
Tampa, FL					
	City/State and Zip Code				
song1213li@	gmail.com				
E-mail	address: (to be used for future annual	report not	ification)		
For further in	nformation concerning this matter, ple	ase call:			
Song Li		510 at (936-3199		
	Name of Person		Area Code & Daytime Telephone Number		
Reg Divi P.O.	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Encl	losed is a check for the following am	ount:			
= \$3	25 Filing Fee	0	\$55 Filing Fee & Certified Copy		
INHS18 (2/14	3)				

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.

l. Na	time of the limited liability company:	Y ou					
2. (a)	1427 Sand Lake Cir, Tampa, FL 33613		(b) 1	1427 Sand Lake Cir, Tampa, FL 33613			
z. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	-	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	05/08/2022	-	1.23	1.22000076511			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a)	LEGALINC CORPORATE SERVICES INC.			AND A STATE OF THE			
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 5237 SUMMERLIN COMMONS SUITE 400						
	Registered Office Address (MUST BE FLORIDA STREET A						
	The state of the s	. 177					
	FORT MYERS , FL	33907					
(b)	Song Li			2 P			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddres	Iress:			
	1427 Sand Lake Cir			20			
	NEW Registered Office Address:	-					
	Tampa FL	33613					
change agent v was/wo the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe bility of f the li	red o comp mitec	d office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in			
	ure of a member or authorized representative of a member	So	ng Li	ξLi			
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee			
provisi he obli o mere iotifiec	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h I in writing of this change.	ee to a perfori l for in ereby	ct in t nance Chaj confi	in this capacity. I further agree to comply with th nce of my duties, and I am familiar with and acce hapter 605, F.S. Or, if this document is being file nfirm that the limited liability company has been			
-	re of Registered Agent						
Signatu	re of Registered Agent						