Division of Corporations

Florida Department of Sp

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H250000341973)))



H250000341973ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email Address:__

LLC REGISTERED AGENT CHANGE DOUBLE H HANDYMAN SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu — Corporate Filing Menu

Help

1/29/2025 05:24:55 PST To: 18506176383 Page. 2/2 Fax: 8134365206

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.

I. Na	me of the limited liability company:DOUBLE H HANG	DYMAN SERV	ICES, LLC
2. (a)		(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)
	7901 4th St N STE 300	79	7901 4th St N STE 300
	St. Petersburg FL 33702	St.	Petersburg FL 33702
	02/25/22	L22	000099506
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	INC AUTHORITY RA		
). (u)	Registered Agent and Registered Office shown on the records of		
	390 NORTH ORANGE AVE.		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	STE 2300-N		25.
	ORLANDO .FL	32801	F1L 2025 JAN 29 SECRETARION
(b)	Registered Agents Inc Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 7901 4th St N	Office address	A C D
	NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
	STE 300	.—	
	St. Petersburg , FL	33702	
he cha igent w vas/we he arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ter authorized by an affirmative vote of the members of teles of organization or the operating agreement of the	vs of the State the registere ability compa of the limited	te of Florida, it is hereby confirmed that after ad office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.
Signat	Signature of a member or authorized representative of a member		Robin Jones Printed or typed name of signee
I herek provisio he obli o mere totifica	oy 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 have the change in the registered office address, I have the change.		
Simatur	David Noverts David Roberts - Assistant Se	corciary	