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Division of Corporations

Florida Department of Stat

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LLC REGISTERED AGENT CHANGE

EWSOUTH WINDOW SOLUTIONS OF DALLAS, LLC

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MAY 21 2024

To:

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Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the understgned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

	ume of the limited liability company: NewSouth Wind 10741 CROSSROADS COMMERCE BLVD	···	10741 CR	ROSSROADS COMMERCE BLVD			
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b	Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)				
	TAMPA, FL 33610		TAMPA, F	FL 33610			
	05/16/2022	_	L22000205	530			
3. 5. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.		Document number			
(u)	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	- 9:					
	Registered Otlice Address (MUST BE FLORIDA STREET	ADDRESS		•			
	TALLAHASSEE	32301-25	25				
(b)	C T Corporation System	28					
, ,	Enter name of NEW Registered Agent and/or NEW Registered	d Office add	ress:	2024 i∵ ₹			
	NEW Registered Office Address:		· · · · · ·	20			
	1200 South Pine Island Road		- FI : 2:				
	Plantation, FI	33324		. ??			
the cha agent v was/wa	imited liability company is not organized under the lainge or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the regis iability co of the lim	tered office mpany, it is ted liability	and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in			
م المعلقة الم		Robe	rt Reed				
I herei provisi the ohl to merc	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ity reflect a change in the registered office address. I I in writing of this change. C T Corporation System	ree to act performed of for in C hereby co	in this cape nee of my c hapter 605 nfirm that	Printed on typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been			

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

Signature of Registered Agent SEANL EMERICK, ASSISTANT SECRETARY