1 22000317763

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Dusiness Faste Marsa) |
| (Business Entity Name) |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|-------------------------|--|
| Vero Beach Home Solutions, L. SUBJECT: | .L.C | |
| | Name of Limited Li | ability Company |
| Dear Sir or Madam: | | |
| The enclosed Registered Agent/Registered | l Office Change and | fee(s) are submitted for filing. |
| Please return all correspondence concernit | ng this matter to the f | following: |
| Courtney Proefrock | | |
| Name of Person | | _ |
| Anderson Business Advisors | | |
| Firm/Company | | |
| 3225 McLeod Drive, #100 | | |
| Address | | _ |
| Las Vegas, NV 89121 | | |
| City/State and Zip Co | ode | |
| ra@andersonadvisors.com | | • |
| E-mail address: (to be used for future | e annual report notifi | cation) |
| For further information concerning this ma | atter, please call: | · |
| Courtney Proefrock | 800 at (| 7064741 |
| 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 follow | wing amount: | |
| ■ \$25 Filing Fee | □ \$5 | 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.

| 1. Na | me of the limited liability company: | Solutio | ms, | LI.C | | |
|--|--|--|--------------------------|--|--|--|
| 2. (a) | | | | 9611 N US HIGHWAY 1 #30 | 17 | |
| (a, | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | ` | ·, | Mailing address of lim (Note: MAY BE PO | • | - |
| | SEBASTIAN, FL 32958 | _ | - | SEBASTIAN, FL 32958 | | |
| | | _ | _ | | | |
| | 07/18/2022 | | I. | .22000317763 | | |
| 3. | Date of filing/registration in Florida | 4. | | Document numbe | г | |
| 5. (a) | JULIO PAGAN | | | | | |
| | Registered Agent and Registered Office shown on the records of t | the Floric | ia D | ept. of State: | | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | ٠ ٠ | |
| | 9611 N US Hwy 1 #307 | | | | , - | |
| | SEBASTIAN , FL | 32958 | | | · · | |
| (b) | Anderson Registered Agents, Inc. | | | | | |
| (0) | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | ess: | • | ı |
| | 625 E. Twiggs Street, Suite 110, | | | | ······································ | |
| | NEW Registered Office Address: | | | | | |
| | | | | | | |
| | Tampa , FL | 33602 | | | | |
| change agent v was/we 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 o cles of organization or the operating agreement of the extuey Proefrock | register ability c of the lir limited | red om nite lia | office and the business offi pany, it is hereby confirmed ed liability company or as o | ce of the regis I that the char | itered ige(s) |
| | ture of a member or authorized representative of a member | | uru | Printed or typed nam | ne of signee | |
| I herei provisi the obl to mere | by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete pigations of my position as registered agent as provided ely reflect a change in the registered office address, I have a change in the registered office address, I have a change in the registered office address. | ee to ac perforn I for in iereby c | t ii ian Ch con | r this capacity. I further ag | ree to comply | with the id accept ing filed s been |

Signature of Registered Agent

February 26, 2024

Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

RE: 42031BT 1808, LLC

To Whom It May Concern:

Enclosed with this letter please find the following:

- 1. Articles of Amendment to Articles of Organization to change entity name
- 2. A check for \$30 for filing fee and Certificate of Status
- 3. A pre-addressed envelope.

Please file and return the certificate to me in the enclosed envelope. If you have any questions or concerns regarding this filing please call me at 800-706-4741.

Sincerely yours,

Morgan Winkler Organizer