## Florida Department of State Division of Corporations

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## LLC REGISTERED AGENT CHANGE STEPPING INTO CLEANLINESS LLC

Certificate of Status	0
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## 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: Stepping into clea	anliness LLC	
2. (	a)	685 Encino way	(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)
		Altamonte Florida (US)32714		
		10/18/2022 12:00:00 AM		000447673
3.		Date of filing/registration in Florida	_ <sub>4.</sub>	Document number
5. (	a)	LEGALING CORPORATE SERVICES INC.		
J. (	aj	Registered Agent and Registered Office shown on the records of	the Florida Dep	t, of State:
		476 Riverside Ave.		
		Registered Office Address (MUST BE FLORIDA STREET	<del></del>	
		Jacksonville, F1  Corporate Creations Network Inc.	32202	 
(1	b)	Enter name of NEW Registered Agent and/or NEW Registered	1 Office address	
		801 US Highway I		
		NEW Registered Office Address:		<u></u> ≴
		North Palm Beach . FI	33408	
chan agen was/	ige it w 'we	mited 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 limited by an affirmative vote of the members of the organization of the operating agreement of the	registered of ability compa of the limited limited liabil	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
Sig	gnat	ure of a member or authorized representative of a member		Printed or typed name of signee
prov the a to m	isie bli ere	oy accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I is in writing of this change.	performance d for in Chap hereby confiri	of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed m that the limited liability company has been
		e of Registered Agent	Gossillari, op	pecial Secretary

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