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To:			
	Division of Corporations		
	Fax Number : (850)617-6383		
From:			
	Account Name : REGISTERED AGENTS INC.	يد. المن	
	Account Number : I20090000081	- 32	2023
	Phone : (307)200-2803		قت •ظ
	Fax Number : (855)330-1010		Ç.
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**Enter the	email address for this business entity to be us	ed for future	70 (344
annual	report mailings. Enter only one email address	Tease	2. 3 x
Email /	Address:	<u></u> ∄- ⊆	<u>л</u>
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LLC REGISTERED AGENT CHANGE LEYS PAINTING AND REMODELING, LLC

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T. LEMIEUX

APR 1 1 2023

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

	me of the limited liability company: LEYS PAII				
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		failing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)	
	11705 MAPLE TREE WAY		<u>11705 M</u>	APLE TREE WAY	
	TAMPA, FL 33625		TAMPA, FL 33625		
	11/03/22		L2200	0473220	
3.	Date of filing/registration in Florida	4.		Document number	
5 (a)	INC AUTHORITY RA				
	Registered Office Address (MUST BE FLORIDA STREET 390 NORTH ORANGE AVE., STE 2300-N ORLANDO . 15	<u> </u>			
(b)	Registered Agents Inc				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office	<u>address</u> :). Ten	
	7901 4th St N			2023	
	<u>NEW</u> Registered Office Address:			, 72 T)	
	STE 300		·	10 P	
	St. Petersburg	1L337()2	2023 AFR 10 PM12: 5	
he cha igent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited at authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the re liability of the F	gistered office company, it is mited liability	rida, it is hereby confirmed that after and the business office of the registere hereby confirmed that the change(s) company or as otherwise provided in	
	ure of a member or authorized representative of a member			ROBIN JONES	
Signat	ure of a member or authorized representative of a member	-		Printed or typed name of signee	

Signature of Registered Agent

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Only David Roberts - Assistant Secretary

David Roberts - Assistant Secretary