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Division of Corporations

**L22000519980**

Florida Department of State  
Division of Corporations  
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To:

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From:

Account Name : SHUMAKER, LOOP & KENDRICK LLP  
Account Number : 075500004387  
Phone : (813)229-7600  
Fax Number : (813)229-1660

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Email Address: arichards@shumaker.com

**LLC REGISTERED AGENT CHANGE  
LAWN & PEST MANAGEMENT OF FLORIDA, LLC**

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

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*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. Name of the limited liability company: LAWN & PEST MANAGEMENT OF FLORIDA, LLC

2. (a) Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
10801 Sunset Plaza Circle, #203  
Ft. Myers, FL 33908

(b) Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
10801 Sunset Plaza Circle, #203  
Ft. Myers, FL 33908

3. 12/12/2022 Date of filing/registration in Florida

4. L22000519980 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
NORTHWEST REGISTERED AGENT LLC  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
7901 4TH ST N STE 300  
ST. PETERSBURG, FL 33702

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
Platinum Filings LLC  
**NEW** Registered Office Address:  
800 Ocala Road, Suite 300-103  
Tallahassee, FL 32304

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the Articles of organization or the operating agreement of the limited liability company.

Logan Lam  
Signature of a member or authorized representative of a member

Logan Lam  
Printed or typed name of signee

*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.*

/s/ Steven Friedman  
Signature of Registered Agent

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

INHS18 (2/14)