3/13/25, 3:52 PM

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Fax: 18134365206 **Division of Corporations**

Florida Department of State



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : 120090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE INNOVATIVE BUILDING SERVICES LLC

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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	ame of the limited liability company:	Jervie	-				
2. (a)	7901 4th St N (b) 7901 4th St			St N			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. ,		s of limited liability co		
	STE 300		STE 300				
	St. Petersburg FL 33702	_	St. Peterst	burg FL 33702	2		
	03/10/23		L230001249	924			
3.	Date of filing/registration in Florida	4.		Document r	number		
5 (a)	UNITED STATES CORPORATION AGENTS, INC.						
(b) _	Registered Agent and Registered Office shown on the records of th	e Florie	la Dept. of Stat	– te:			
	476 RIVERSIDE AVE.						
	Registered Office Address (MUST BE FLORIDA STREET A)	e Address (MUST BE FLORIDA STREET ADDRESS)			2025 MAR Second		
	JACKSONVILLE , FL	2202		- - '	FIL MAR 13 W Bass ARASSI		
	Registered Agents Inc			<u>;</u>		7	
	Enter name of NEW Registered Agent and/or NEW Registered C)ffice a	ddress:		AH IO: OF STA OF FLOR		
	7901 4th St N				STE 34		
	NEW Registered Office Address:			_			
	STE 300			_			
	St. Petersburg	3702					
the cha agent w was/we the arti	imited liability company is not organized under the lawsinge or changes are made, the Florida street address of tivil be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liabere authorized by a different partial particles of a member or authorized representative of a member	he reg pility of the lift imited	istered offic company, it i nited liabilit	e and the bus is hereby con ty company c	siness office of the ifirmed that the cha	registered inge(s)	
Signat	ture of a member or authorized representative of a member	-		Printed or typ	ped name of signee		
provisi the obli to mere natified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I ha I in writing of this change.	e to ac erfori for in creby	ct in this cap nance of my Chapter 60. confirm that	pacity. I furth duties, and h 5, F.S. Or, if the limited h	her agree to compl I am familiar with i f this document is b liability company h	y with the and accep peing filed as been	
vid Y-e	David Roberts - Assistant Sec	retary					