

# L23000210584

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200402723852

05/09/23--01010--023 ++25.00

FILED  
2023 MAY -9 PM 2:44  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** G10 with the F10 complete Home Help LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Florinda Russell  
Name of Person

G10 with the F10 - complete Home Help LLC  
Firm/Company

20119 Suncrest Dr.  
Address

Brooksville FL 34601  
City/State and Zip Code

352G10withtheF10@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Florinda Russell at (352) 587-1018  
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 following amount:**

☒ \$25 Filing Fee

☐ \$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. Name of the limited liability company: GIO with the FIO Complete Home Help LLC

2. (a) GIO with the FIO Complete Home Help (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

20119 Suncrest Dr.  
Brooksville FL 34601

20119 Suncrest Dr.  
Brooksville FL 34601

3. 4/28/23 Date of filing/registration in Florida 4. L23000210584 Document number

5. (a) United States Corporation Agents inc  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Cheyenne Moseley  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

476 Riverside Ave  
Jacksonville FL, FL 32202

(b) Florinda Russell  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

GIO with the FIO Complete Home Help LLC  
**NEW Registered Office Address:**

20119 Suncrest Dr.  
Brooksville FL 34601

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.

Florinda Russell  
Signature of a member or authorized representative of a member

Florinda Russell  
Printed or typed name of signer

*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.*

Florinda Russell  
Signature of Registered Agent

FILED  
2023 MAY -9 PM 2:44  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA