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To:	Division of Corporations	
	Fax Number : (850)617-6383	
From:		
	Account Name : REGISTERED AGENTS INC.	
	Account Number : I20090000081	
	Phone : (307)200-2803	
	Fax Number : (813)436-5206	
annual	email address for this business entity to be used for ful report mailings. Enter only one email address please.**  Address:	ture 2023 Lo

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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	nne of the limited liability company: <u>MILLS CONSTRU</u>	JCTION	ROOFING D	IVISION, LLC	
2. (a)	7901 4th St N		(b) 7901 4th St N		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	STE 300		STE 300		
	St Petersburg FL 33702 US		St. Peterst	ourg FL 33702 US	
	06/09/2023		L23000280	318	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	BY THE BOOK ACCOUNTING & TAX SERVICE				
	Registered Agent and Registered Office shown on the records of t	he Florid	a Dept. of Stat	te:	
′ -	2659 E GULF TO LAKE HWY			_	
	Registered Office Address [MUST BE FLORIDA STREET]				
	STE 402			,	
	INVERNESS FL	34453		1025 F	
	Northwest Registered Agent LLC			2025 FEB -3 AM	
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	<u>ldress</u> :	E SE	
	7901 4th St N  NEW Registered Office Address:		· .	- ORUE	
	NOW REGISTERS OTHER ADMESS.			gen O	
	STE 300			<del>-</del>	
	St. Petersburg , F1.	33702		_	
the cha agent w was/we the artic	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the the regi shility co f the lin limited	stered officompany, it in ited liability cor-	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in upany.	
Signal	ture of a member or authorized representative of a member	<u>Nat</u>	Smith	Printed or typed name of signee	
Therel provisi the obli to mere notifica	by accept the appointment as registered agent and agrounds of all statules relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have the provided of the change of this change.			and the state of t	
(m)   Vann	Taylor Newman - Assistant Se				
Signatur	re of Registered Agent				