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ALLAHASSEE, FLORIDA

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TO: Registration Section Division of Corporations GIUSY HICLEANING SERVICES, LLC SUBJECT: 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: YUSIMI PORTAL Name of Person GIUSY II CLEANING SERVICES, LLC Firm/Company 4541 DURNEY ST Address **NEW PORT RICHEY, FL 34652** City/State and Zip Code PORTALYUSIMI@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: YUSIMI PORTAL 813 Area Code & Daytime Telephone Number Name of Person **Mailing Address: Street Address:** Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Enclosed is a check for the following amount:

№ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

Tallahassee, FL 32303

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.

. Na	ame of the limited liability company: GIUSY H CLEA	ANING SERVICES, LLC	
	GIUSY H CLEANING SERVICES, LLC	(b) GIUSY H CLEANING SERVICES, LLC	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	4541 DURNEY ST	4541 DURNEY ST	
	NEW PORT RICHEY, FL 34652	NEW PORT RICHEY, FL 34652	
	09/18/2023	1.23000432580	
	Date of filing/registration in Florida	4. Document number	
(a)	YOUR MULTISERVICE GROUP, LLC		
, (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET) 10031 US HWY 19	*ADDRESS)	
	PORT RICHEY . FI	1 34668 L	
(b)	YUSIMI PORTAL		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
		TALLAHASSEE, FLORIE	
	NEW Registered Office Address:	SSE 6	
	4541 DURNEY ST		
	NEW PORT RICHEY	TALLAHASSEE. FLORIDA	
ange ent w is/we	or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited lia	tws of the State of Florida, it is hereby confirmed that after the registered office and the business office of the registered iability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in	
<u>अक्रमा</u>	nce of a member or authorized representative of a member	Printed or typed name of signee	
ovisie e obli mere	ons of all statutes relative to the proper and complete gations of my position as registered agent as provided	ree to act in this capacity. I further agree to comply with the e performance of my duties, and I am Jamiliar with and accep ed for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been	