## 1\_23 000 490 445

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Malis Pressure Mame of Limited Lia	Jushing LLC bility Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change and fe	ec(s) are submitted for filing.
Please return all correspondence concerning this matter to the fo	ollowing:
Malachy Mackey  Name of Person  Mal's pressure washing LLC  Firm/Company	2000 I.C.
138 Sunflawer And Address	
Talluhassee Florida 32305 City/State and Zip Code	_
E-mail address: (to be used for future annual report notific	ation)
For further information concerning this matter, please call:	
Malathy Mattey at (850) 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	5 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.

l. Na	ame of the limited liability company: Mal's pressure Washing LLC
	138 Sunflower Ad (b) 138 Sunflower Ad
2. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	10/30/2023 123000 490 445
3.	Date of filing/registration in Florida 4. Document number
5. (a)	United States Corporation agents Inc.
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	Registered Office Address - (MUST RE FLORIDA STREET ADDRESS)
	1/
	Jacksonville EL 32202
	, FL 3 2&0 %
(b)	Malachy Mackey
	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	138 Sunfrower Md
	NEW Registered Office Address:
	<del></del>
	Tallahassee FL 32305
change agent was/w	limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the e or changes are made, the Florida street address of the registered office and the business office of the registered will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ere authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in icles of organization or the operating agreement of the limited liability company.
	Malathy Matkey  ture of a member or authorized representative of a member  Malathy Matkey  Printed or typed name of signee
	ture of a member or authorized representative of a member Printed or typed name of signee
поине М	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept ligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed tely reflect a change in the registered office address, I hereby confirm that the limited liability company has been din writing of this change.
7V J Signati	un Maria de la Companya de la Compan