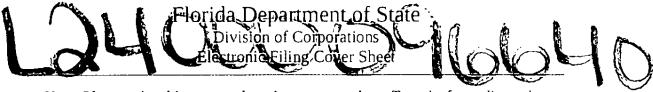
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Division of Corporations



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(((H25000031139 3)))



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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

\*\*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 HYDRO TECH PRESSURE WASHING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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1/27/2025/12:14:39 PST To. 18506176383 Page: 2/2 Fex: 8134365206

## 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.

i.	Na	me of the limited liability company: HYDRO TECH PR	RESSUF	RE WASHING	LLC
2. (:	a)			[b)	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		7901 4th St N STE 300	_	3229 Saint	Croix Lane
		St. Petersburg FL 33702		Clermont F	lorida 34711
		02/26/24		L240000966	40
3.		Date of filing/registration in Florida	4.		Document number
5. (	a)	INC AUTHORITY RA			
1	,	Registered Agent and Registered Office shown on the records of			
		390 NORTH ORANGE AVE.			
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u>(S)</u>	-
		STE 2300-N			
		ORLANDO FL	32801		<b>2025</b> SEC FALL
(b)		Registered Agents Inc			FIL <b>2025 JAN 27</b> SECRUTARY TALLAHASSES
		Enter name of NEW Registered Agent and/or NEW Registered Office address:			
		7901 4th St N			ED PSTA EFLOR
		NEW Registered Office Address:			<b>64</b>
		STE 300			
		St. Petersburg FL	33702		
the cagen was/ the a	ha it w we irtic	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of eles of organization or the operating agreement of the	the regability of the lin	istered office company, it is mited liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in
		ure of a member or authorized representative of a member			Robin Jones
I he prov the o to mo notif	rek isiobli ere ica	ure of a member or authorized representative of a member by accept the appointment as registered agent and agrows of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I lim writing of this change.  Date Construct Apple			Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been