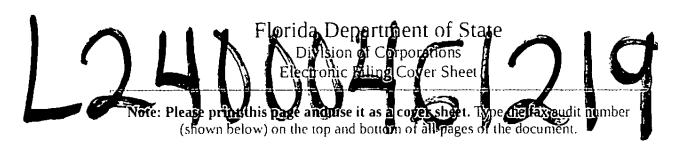
11/29/2024 07:13:40 PST - To. 18506176383 Page: 1/2 Fax: 8134365206



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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

Email	Address:_	 	_ 	

LLC REGISTERED AGENT CHANGE THOMAS'S HANDYMAN SERVICE LLC

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

M. SOLOMON

DEC - 3 2024

11/29/2024 07:13:40 PST - r To: 18506176383 Page: 2/2 Fax: 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.

1.	Na	me of the limited liability company: THOMAS'S HAN	DYMAN S	ERVICE LLO	C		_	
2. (a)	7901 4th St N STE 300	(b	(b) 7901 4th St N STE 300				
		Principal office address of limited liability company: (Note: MUST_BE_STREET_ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		St. Petersburg FL 33702 US		St. Petersb	ourg FL 33702 US			
			_				···	
		10/30/2024	.	L240004612	219			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	NEWMAN, TAYLOR			_			
		Registered Agent and Registered Office shown on the records of			e:			
		7901 4TH ST N STE 300			,	~		
		Registered Office Address (MUST BE FLORIDA STREET)	2	~ (. 1) ;	2024 DEC			
					, <u>.</u>	DEC	7	
		ST. PETERSBURG FI	33702		- 34.	: -2	19 42 ED 6	
(b)		Northwest Registered Agent LLC			- 1995 - 1995 - 1995	PH [2:	J	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ado	<u>lress</u> :	7 <u>7</u>	;; 	٠	
		7901 4th St N			• • • • • • • • • • • • • • • • • • • •	w		
		NEW Registered Office Address:		-	-			
		STE 300			_			
					•			
		St. Petersburg , FL	33702					
the age was	cha nt w /we	mited liability company is not organized under the lay nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited live authorized by an affirmative vote of the members cales of organization or the operating agreement of the	the regis ability co of the lim	stered office inpany, it is ited liability	e and the business office is hereby confirmed that to y company or as otherwise	of the i	registered nge(s)	
	1	use of a member or authorized representative of a member	Nat S	Smith				
Ši	gnat	ure of a member or authorized representative of a member			Printed or typed name of sign	ice		
pro the to n noti	visie obli iere iliaa	y accept the appointment as registered agent and agions 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 fin writing of this change.	ve to act performa d for in C hereby co	in this cape ince of my Chapter 605 onfirm that	acity. I further agree to a duties, and I am familiar 5, F.S. Or, if this docume the limited liability comp	comply with a nt is be any ha	with the nd accept ging filed as been	
<u>/</u> سا		- ayrer realistant a	ecretary					
Sign	atur	e of Registered Agent						