DOCUMENT #       L66657       (2)         PREMIER HOME SERVICES, INC.       Principal Place of Business       Mailing Address         Se2 JOLANDA CIRCLE VENCE FL 34292 US       962 JOLANDA CIRCLE VENCE FL 34292 US       962 JOLANDA CIRCLE VENCE FL 34292       962 JOLANDA CIRCLE VENCE FL 34292         2. Principal Place of Business       2a. Mailing Address       4. FEI Number       3a. Date of Last Report Od/18/1990         2. Principal Place of Business       2a. Mailing Address       4. FEI Number       Applie         3. Date incorporated or Qualified       3a. Date of Last Report       Od/19/1995         2. Principal Place of Business       2a. Mailing Address       4. FEI Number       Applie         3. Date incorporated or Qualified       3a. Date of Last Report       Od/19/19/1995         2. Principal Place of Business       2a. Mailing Address       4. FEI Number       Applie         3. Suite, Apt. 4, etc.       2bille, Apt. 4, etc.       5. Contificate of Status Desired       \$8.75 Address         2. Country       2ip       2ip       2ip       Country       5. Contificate of Status Desired       \$8.75 Address         3. Date fund Contribution       2add to f       2ip       2ip       3ip       Trust Fund Contribution       Address of Not Acceptable to under s 199.         4. 25       25       30       30 </th <th>d For</th>	d For
Mailing Address       Mailing Address         962 JOLANDA CIRCLE VENICE FL 34292 US       962 JOLANDA CIRCLE VENICE FL 34292 US       962 JOLANDA CIRCLE VENICE FL 34292 US       3. Date incorporated or Qualified 3. Date of Last Report 04/18/1990       3. Date of Last Report 04/19/1995         Principal Place of Business       2. Mailing Address       4. FEI Number       Applie         Suite, Apt. #, etc.       Suite, Apt. #, etc.       5. Contribution       Status Desired       \$8.75 Add Fee Requit         City & State       City & State       6. Election Campaign Financing Trust Fund Contribution       \$8.00 Ma Added to F         Zip       Country       Zip       Country       8. This corporation has liability for intangible tax under s 199. Florida Statutes       Yes No         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       81         CABANA, WILLIAM A 962 JOLANDA CIR       83       Street Address (P.O. Box Number is Not Acceptable)	d For
See JoLANDA CIRCLE     See JOLANDA CIRCLE       VENICE FL 34292     VENICE FL 34292       US     3. Date Incorporated or Qualified     Se. Date of Last Report       Odd/18/1990     Odd/19/1995       Principal Place o' Business     2a. Mailing Address     4. FEI Number     Applie       Principal Place o' Business     2a. Mailing Address     4. FEI Number     Applie       Suite, Apt. #, etc.     Suite, Apt. #, etc.     Suite, Apt. #, etc.     5. Contificate of Status Desired     Fee Require       City & State     City & State     Country     Zip     Country     Zip     Non       2g     2g     30     This corporation has lability for intangible tax under s 199. Florida Statutes     Yes     No       9     Name     Address of Current Registered Agent     State     10. Name and Address of New Registered Agent       81     Name     Street Address (P.O. Box Number is Not Acceptable)     State	d For
VENICE FL 34292 US     VENICE FL 34292 US     3. Date incorporated or Qualified 04/18/1990     3a. Date of Last Report 04/19/1995       Principal Place o' Business     2a. Mailing Address     4. FEI Number     Applie       26     65-0191330     Not A       Suite, Apt. #, etc.     Suite, Apt. #, erc.     5. Contificate of Status Desired     \$8.75 Add       27     27     5. Contificate of Status Desired     \$8.75 Add       City & State     City & State     5. Contificate of Status Desired     \$5.00 Ma       27     28     Trust Fund Contribution     Added to F       Zip     Country     Zip     Country     Size       25     29     30     Florida Statutes     Yes       9. Name and Address of Current Registered Agent     81     Name       CABANA, WILLIAM A     82     Street Address (P.O. Box Number is Not Acceptable)     5	
Principal Place o     Business     2a. Mailing Address     4. FEI Number     Applie       26	
Principal Frace of Dusiness     Image of Sector       26     65-0191330       Suite, Apt. #, etc.     5. Contificate of Status Desired       27     27       City & State     6. Election Campaign Financing Trust Fund Contribution       28     7       Zip     Country       25     29       30     9. Name and Address of Current Registered Agent       81     Name       82     Street Address (P.O. Box Number is Not Acceptable)       92     JOLANDA CIR	
Zip     Country     Zip     Country     Zip     Country     Zip     Country     Zip     Country     Status     Status <th< td=""><td>pricable</td></th<>	pricable
City & State       City & State       6. Election Campaign Financing Trust Fund Contribution       \$5.00 Ma Added to F         Zip       Country       Zip       Country       Zip       Country       8. This corporation has liability for intangible tax under s 199. Florida Statutes       Yes       No         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       81       Name         CABANA, WILLIAM A       82       Street Address (P.O. Box Number is Not Acceptable)       83	
Zip     Country     Zip     Country     Zip       25     29     30     Florida Statutes     Yes     No       9. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent       61     Name       CABANA, WILLIAM A 962 JOLANDA CIR     81	/ Be
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  10. Name and Add	32,
CABANA, WILLIAM A 962 JOLANDA CIR 83	
84       City       FL       85       Zip Coc         Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent familiar with, and accept the obligations of, Section 07.0505, Florida Statutes.       William A. Roans       4/12/16	red office
Signature, typed or printed name of registered agent and the if applicable (NOTE: Registered Agent sgrature regured when tenstating) DATE	12
	Addition
ME CABANA, FLORENCE	
EEI ADDRESS     962 JOLANDA CIRCLE     1.3 STREET ADDRESS       Y-SU-ZIP     VENICE FL     1.4 CITY-SU-ZIP	
	Addition
22 NAME	
2 3 STREET ADDRESS 2 4 City - St - ZiP	Addition
EET ADDRESS         2.3 STREET ADDRESS           (-51-7)P         2.4 CHY-ST-7)P           F         DELEFE           3.1 TITLE	
EEI ADDRESS         2 3 STREET ADDRESS           (-St-7)P         24 CITY-ST-7)P           F         DELEFE           AE         3 2 NAME	Addition
2 3 STREET ADDRESS     2 3 STREET ADDRESS       -St-ZIP     24 CITY-ST-ZIP       F     DELEFE       1 DELEFE     3 1 TITLE       32 NAME       33 STREET ADDRESS       -St-ZIP       33 STREET ADDRESS       -St-ZIP	Addition
EET ADDRESS         2.9 STREET ADDRESS           F-S1-ZIP         2.4 CITY - ST-ZIP           F         DELEFE           AE         3.2 NAME           BET ADDRESS         3.3 STREET ADDRESS           Y-S1-ZIP         3.4 CITY - ST-ZIP           Change         3.4 CITY - ST-ZIP           Change         0.4 CITY - ST-ZIP	
2 3 STREET ADDRESS         2 3 STREET ADDRESS           2-St-ZIP         24 CITY - ST-ZIP           F         DELETE         3 TITLE           AE         32 NAME           BEL ADDRESS         33 STREET ADDRESS           (-St-ZIP)         34 CITY - ST-ZIP           F         DELETE         4.1 TITLE           F         DELETE         4.1 TITLE           AE         24 CITY - ST-ZIP	
2 3 STREET ADDRESS         2 3 STREET ADDRESS          St-ZIP         24 CITY-ST-ZIP           F         DELETE           1 DELETE         3 TITLE           32 NAME           32 STREET ADDRESS           1-St-ZIP           Change           IF           DELETE           33 STREET ADDRESS           1-St-ZIP           I-St-ZIP	
EF ADDRESS       2 3 STREET ADDRESS         -S1-2iP       24 CitY-ST-2iP         F       DELETE         A DORESS       32 NAME         BE       32 NAME         AL ADDRESS       33 STREET ADDRESS         -S1-2iP       34 CitY-ST-2iP         F       DELETE         4 CitY-ST-2iP       Change         ST-2iP       34 CitY-ST-2iP         F       DELETE         4 CitY-ST-2iP       Change         FE       DELETE         42 NAME       42 NAME         43 STREET ADDRESS       43 STREET ADDRESS         -ST-2iP       44 CitY-ST-2iP         FE       DELETE       5 1 TiTLE         FE       DELETE       5 1 TITLE	Addition
EF ADDRESS     2 3 STREET ADDRESS       -S1-2iP     24 CitY-ST-2iP       F     DFLETE       B     3 TITLE       ADDRESS     33 STREET ADDRESS       -S1-2iP     34 CitY-ST-2iP       S1-2iP     34 CitY-ST-2iP       FE     DELETE       4 CitY-ST-2iP     Change       BE     1 TiTLE       Change     Change       S1-2iP     34 CitY-ST-2iP       FE     DELETE       4 CitY-ST-2iP       FE     42 NAME       FE     43 STREET ADDRESS       -S1-2iP     44 CitY-ST-2iP       FE     DELETE       44 CitY-ST-2iP       FE     DELETE       51 7iP     Change	
23 STREET ADDRESS     23 STREET ADDRESS      S1-2iP     24 CitY-S1-2iP       F     DELETE       AE     32 NAME       BELADDRESS     33 STREET ADDRESS      S1-2iP     34 CitY-S1-2iP       F     DELETE       4.1 TitLE     Change       AE     34 CitY-S1-2iP       F     DELETE       4.1 TitLE     Change       AE     4.1 TitLE       F     DELETE       4.1 TitLE     Change       AE     4.2 NAME       4.2 NAME     4.3 STREET ADDRESS      S1-2iP	Addition
23 STREET ADDRESS     23 STREET ADDRESS       24 CITY-ST-ZIP	
EET ADDRESS       2.3 STREET ADDRESS         F-SI-ZIP       24 CITY-ST-ZIP         F       DFLEFE       3.1 TITLE         AE       32 NAME         EET ADDRESS       3.3 STREET ADDRESS         y-SI-ZIP       34 CITY-ST-ZIP         F       DELETE         4.1 TITLE       Change         y-SI-ZIP       34 CITY-ST-ZIP         F       DELETE         4.1 TITLE       Change         g       34 CITY-ST-ZIP         F       DELETE         4.1 TITLE       Change         g       Y-SI-ZIP         F       DELETE         G       DELETE         G       SI STREET ADDRESS         g       Y-SI-ZIP         ME       S2 NAME         S2 NAME       S3 STREET ADDRESS         g       S3 STREET ADDRESS	Addition