S00000010H

(Requestor's Name)
(Address)
(Address)
(1001033)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Sosament names)
Carliford Carlos
Certified Copies Certificates of Status
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of slulaux

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

. . .

		ACCOUNT NO.	:	12000000	0195			
		REFERENCE	:	666543	8379496			
		AUTHORIZATION	:,	Lorell &				
		COST LIMIT	:	(\$\25.00	ena			
ORDER I	DATE :	May 10, 2022						
ORDER T	CIME :	11:13 AM						
ORDER N	10. :	666543-002						
CUSTOME	ER NO:	8379496						
	·					-		
CHANGE OF AGENT								
	NAME.	COMPLIANCE E		O CV CM EMC				
	NAME:	COMPLIANCE E	иотг	COSISTEMS,	FIFC			
PLEASE	RETURN	THE FOLLOWING A	S PF	ROOF OF FI	LING:			
		FIED COPY						
	-	STAMPED COPY						
CONTACT	PERSON	N: Alexxis Weila	and					

EXAMINER'S INITIALS:

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	ame of the limited liability company: COMPLIANCE	ENVIRO	SYSTEMS	S, L.L.C.					
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)						
	1401 SEABORD	1401 SEABORD							
	BATON ROUGE, LA 70810	_	BATON ROUGE, LA 70810						
	04/17/2001		M010000	00862					
3.	Date of filing/registration in Florida	_ 4.		Document nur	mber	_			
5. (a)									
J. (a)	Registered Agent and Registered Office shown on the records of	the Florid	ia Dept, of St	 ate:					
	C T CORPORATION SYSTEM		•						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	:S)		<u>v</u>	20			
	1200 SOUTH PINE ISLAND ROAD	<u> </u>		I AL	22 A				
	PLANTATION . FI	33324		_		2022 APR 13			
	,,,	·	•	_	Alansee, fl	ယ			
(b)					Ĕ.	₽			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	e soino i	ddress:		23	9. 1	الكييا		
	Corporation Service Company				· ∺	<u> </u>			
	NEW Registered Office Address:								
	1201 Hays Street								
									
	Tallahassee FI.	_32301 							
change agent v was/we the arti /S.	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the /: JILL CILMI	register ability co of the lin limited	red office a ompany, it nited liabili liability co	nd the business of the confirmation is the company or a meany. UTHORIZED PERSONNERS OF THE CONTROL OF THE CONT	office of t med that t as otherwi	he regi the cha ise pro	istered inge(s)		
Signature of a member or authorized representative of a member				Printed or typed	Printed or typed name of signee				
provisi the obl to mere	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address, I if in writing of this change.	perform d for in hereby c	iance of my Chapter 60 confirm thai	pacity. I further duties, and I an 5, F.S. Or, if th the limited liab ASST. VICE PI	n familiar is docume pility comp	with a ent is b oany ho	with the and accept eing filed as been		
Signatu	re of Registered Agent								

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00