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Division of Corporations

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LLC REGISTERED AGENT CHANGE STELLAR RESTORATION SERVICES, L.L.C.

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## 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 Statites, 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.

2. (a)		(b)	
-· (u)	Principal office address of limited liability comp ( <u>Note: MUST BE STREET ADDRESS</u> ) 15119 Memorial Drive Suite 200	nuiv.)	Mailing address of limited fiability company:  (Note: MAY BE POST OFFICE BOX)  W Sam Houston PKWY N Suite 225
	Houston, TX 77079	Hou	ston, TX 77024
	02/29/2016	м16	000001757
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the re-	cords of the Florida Dept.	of State:
	INCORP SERVICES. INC.		
	Registered Office Address (MUST BE FLORIDA ST 17888 67TH COURT NORTH	TREET ADDRESS)	~
	LOXAHATCHEE	33470	2023 JAN -4 2023 JAN -4
	C T Corporation System		
(0)	Enter name of NEW Registered Agent and/or NEW Re	gistered Office address:	PH 2:
	NEW Registered Office Address: 1200 South Pine Island Road		25
	Plantation	33324 F1.	
he cha igent w vas/we -becosio	mited liability company is not organized under	the laws of the State lress of the registered nited liability compan mbers of the limited li	of Florida, it is hereby confirmed that after office and the business office of the registered by, it is hereby confirmed that the change(s) lability company or as otherwise provided in by company.
	approach more or authorized representative of a member	<u> </u>	Printed or typed name of signee
rovisio he obli	ny accept the appointment as registered agent a six of all statules relative to the proper and congations of my position as registered agent as ply reflect a change in the registered office addition writing of this change.  C. T. Corporation System	mplete performance o provided for in Chapte	y my duties, and Lam familiar with and accept ir 605, F.S. Or, if this document is being filed