

MI16000008562

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

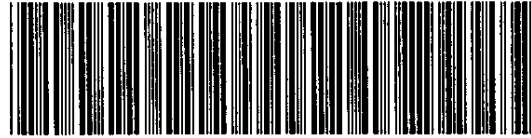
(Document Number)

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FILED  
17 NOV -6 AM 11:59  
SECONDARY OF STATE  
TALLAHASSEE, FLORIDA

S. WARREN

NOV 08 2017

CSC – NCH – IFF

TO: PHYSICAL: Dept. of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

MAILING: Dept. of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

FROM: National Corporate Headquarters, Inc.  
5605 Riggins Court Suite 200  
Reno NV 89502  
(800) 638-2320  
(775) 329-0852

DATE: Wednesday, November 01, 2017

*SENT VIA USPS*

To Whom It May Concern:

Attached, please find the following document(s):

- Change of Registered Agent

For **180 HOME SOLUTIONS, LLC**

We have included payment in the amount of \$25.00 for the following fees:

- Change of Registered Agent

We have included one original and one copy of the Articles.

If there are any questions, please call 800-542-2077

**Please return the file stamped copy of the Articles to the address below:**

Renewal Department  
5605 Riggins Court Suite 200  
Reno NV 89502

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** 180 HOME SOLUTIONS, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**Christian Kirby**

Name of Person

180 HOME SOLUTIONS, LLC

Firm/Company

3508 17th St E

Address

Bradenton, FL 34208

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

**For further information concerning this matter, please call:**

Name of Person \_\_\_\_\_ at ( \_\_\_\_\_ ) \_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

~~☒~~ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**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. Name of the limited liability company: 180 HOME SOLUTIONS, LLC
2. (a) 180 HOME SOLUTIONS, LLC  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
3508 17th St E  
Bradenton, FL 34208
- (b) 180 HOME SOLUTIONS, LLC  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
3508 17th St E  
Bradenton, FL 34208
3. 10/27/2016  
Date of filing/registration in Florida
4. M16000008562  
Document number
5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
BUSINESS FILINGS INCORPORATED  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324
- (b) \_\_\_\_\_  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
Registered Agents Inc.  
**NEW** Registered Office Address:  
3030 N. Rocky Point Dr. STE 150A  
Tampa, FL 33607

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Christina Kirby

Signature of a member or authorized representative of a member

Christina Kirby

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Bill Havre

Bill Havre

- Assistant Secretary

Signature of Registered Agent