Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

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From:

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033 Fax Number : (561)694-1639

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LLC REGISTERED AGENT CHANGE GP BUILDING PRODUCTS SERVICES LLC

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Help

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.

.		PRODUCTS S	RODUCTS SERVICES LLC		
	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	(b)_	133 Peachtree St NE, Atlanta, GA 30303		
(a)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	01/09/2018	MI	8000000246		
(a)	Date of filing/registration in Florida CT CORPORATION SYSTEM	4,	Document number		
(a)	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	of the Florida De	pt. of State:		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	0%		
	PLANTATION, 1	33324 FL	FILL 22 SLUTANA 9 SEE.		
<i>a</i> .	UNITED AGENT GROUP INC.		JUL 2		
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office addre			
	801 US HIGWAY I		AH 9:		
	NEW Registered Office Address:				
	NORTH PALM BEACH	33408 FL			
ange ent v is/we art	imited liability company is not organized under the cor changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icides of organization or the operating agreement of the under the operation of the member of a member or authorized representative of a member	he registered of liability comp s of the limited ne limited liab Adia M	office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in ility company. Myles, Attorney-in-fact Printed or typed name of signee		
oviși e obi mer	by accept the appointment as registered agent and a lions of all statutes relative to the proper and comple ligations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change.	te p e rjormanc ded for in Cha	e of my aunes, and I am familiar with and acce inter 605. F.S. Or. if this document is being file		
gnat	Adia Myles, Special Secretary				