975 COCOCO 12M

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer						
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Office Use Only						

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FALLAHASSEE FLORID



To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext:

Date: 05/07/24 Order #: 1500851-1

Re: Factory Cleaning Equipment By Jondon, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$35-00 - FL State Account Number: 120000000195

AUTH, 1 25.00

Please take/the following action:

File on a routine basis Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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 sybmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida

1.	Na	me of the limited liability company:	FACTORY CLEA	NING I	EQUIPMEN	IT BY JONDON LLC		
2. (a	a)			(l	o)			
	,	Principal office address of limited li (Note: MUST BE STREET)	ability company:	- . `	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		400 Medinah Rd Roselle, IL 60172		_	400 Med	inah Rd Roselle, IL 60172		
		12/29/2020		_	M2100000	00346		
3.		Date of filing/registration in	ı Florida	4.		Document number		
5. ((a)							
· (,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State Grosskopf, Robert				te:		
		Registered Office Address (MUST BE F 3919 AIRPARK DR #1-3	LORIDA STREET A.	DDRESS	<u>5)</u>	2024HAY -		
		LAKELAND		33811				
(1	b) _.	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			TIME 31			
		Corporation Service Company				· m		
		NEW Registered Office Address:			_			
		1201 Hays Street				_		
		Tallahassee	, FL_	32301		_		
chan agen was/	ige it w we	or changes are made, the Florida stre fill be identical. Or, in the case of a l	eet address of the r Florida limited liab of the members of	egistero oility co the lin	ed office ar impany, it i nited liabili	orida, it is hereby confirmed that after the nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in upany.		
/s/ Candace Goffrier			Car	Candace Goffrier				
Signature of a member or authorized representative of a member					Printed or typed name of signee			
prov the a to m	isio bli ere	y accept the appointment as register ons of all statutes relative to the prop gations of my position as registered by reflect a change in the registered I in writing of this change.	ed agent and agre per and complete p agent as provided office address, I he	e to act erform for in (ereby co	in this cap ance of my Chapter 60, onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been		

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

Signature of Registered Agent