## 42100001547

(Reques	stor's Name)				
(Addres	s)				
(Address)					
(City/Sta	ate/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Busine	ss Entity Name)				
(Docum	ent Number)				
Certified Copies	Certificates of Status				
Special Instructions to Filin	g Officer:				





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.2022 HAY 26 AM 11: 44

RECEIVED

J 5/27/2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 708091 8381300

AUTHORIZATION

COST LIMIT : 10 25 25 00

ORDER DATE: May 25, 2022

ORDER TIME : 9:40 AM

ORDER NO. : 708091-010

CUSTOMER NO: 8381300

\_\_\_\_\_\_

## CHANGE OF AGENT

NAME: CLEARWATER INDUSTRIES LLC

DBA: Clearmater Industried Kloricia, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
X PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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.

2. (a)		(1	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)
	1042 S CONGRESS AVE		7537 N	LAKESIDE LN
	W PALM BEACH, FL 33406	<u> </u>	PARA	DISE VALLEY, AZ 85253
	02/08/2021		M21000	0001547
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
,. (u)	Registered Agent and Registered Office shown on the records	of the Florid	a Dept. of S	State:
	REALE, JOE			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			202 5-1 5-1
	1042 S CONGRESS AVE			>C 2 E # *F
	W PALM BEACH	33406		1022 MAY 26
	W PALM BEACH	FL	<del>-</del> -	:
(1-)				
(b)	Enter name of NEW Registered Agent and/or NEW Register		ldress:	M 9:46
	Corporation Service Company			_
	NEW Registered Office Address:			
	1201 Hays Street			<u> </u>
	Tallahassee	FL 32301		
hange igent w vas/we	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the case.	laws of the the register Uliability cors of the lin	ed office impany, i nited liabi	and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in
/s/ Jose	Joseph Reale Joseph Reale			e, Manager
	ture of a member or authorized representative of a member			Printed or typed name of signee
l herel provision he obli pomere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi tly reflect a change in the registered office address,	agree to act ete perform ided for in ( I hereby co	in this co ance of m Thapter 6 onfirm the	apacity. I further agree to comply with the ay duties, and I am familiar with and accep 105, F.S. Or, if this document is being filed at the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President on behalf of Corporation Service Company