0001270

	(Requestor's Name)								
(Address)									
	(Address)								
	(City/State/Zip/Phone #)								
_	P WAIT MAIL								
	(Business Entity Name)								
(Document Number)									
Certified Copies	Certificates of Status								
Special Instructions	s to Filing Officer								
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A. BUTLER

MAY - 2 2022

CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195									
REFERENCE : 641510 8279311									
AUTHORIZATION: Line Bollera									
COST LIMIT : \$)25.00									
ORDER DATE : April 27, 2022									
ORDER TIME : 8:47 AM									
ORDER NO. : 641510-030									
CUSTOMER NO: 8279311									
	·								
CHANGE OF AGENT									
NAME: ARNETT HEATING & COOLING, LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Alexxis Weiland 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.

1.	Na	me of the limited liability company: ARNETT HE	EATING & CO	OLING, LLO	<u> </u>				
2	(a)	83 Orange Street	(b)	201 E. Ken	inedy Bouleva	rd, Suite 1	1600		
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*)	Mi	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		St. Augustine, FL 32084		Tampa, FL	33602		_		
		09/27/202	^	M21000012708					
3. s	(a)	Date of filing/registration in Florida Gideon Moore	4.	С	Ocument num	ber			
5.	(a)	Registered Agent and Registered Office shown on the records 201 E. Kennedy Boulevard, Suite 1600	s of the Florida I	Dept. of State:					
		Registered Office Address (MUST BE FLORIDA STRE		Z022 APR SECRETALLA					
		Tampa	FL33602			AHAS		CONTROL OF THE CONTRO	
	(b)	Enter name of NEW Registered Agent and/or NEW Register	ered Office add	<u> </u>		OF STATE			
		NEW Registered Office Address:		 -					
		1201 Hays Street							
		Tallahassee,	FL_32301						
ch ag wa	ange ent v as/we	imited liability company is not organized under the or changes are made, the Florida street address of vill 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 organization or the operating agreement of the operating	the registered I liability con rs of the limit	l office and to pany, it is he diability of the liability	the business of nereby confirm company or as	ffice of the	e regis ie chan	tered ge(s)	
/s/ Jill Cilmi			Jill C	Jill Cilmi, Authorized Person					
	Signa	ture of a member or authorized representative of a member		Í	Printed or typed n	ame of sign	cc		
pr the	ovisi e obl mere	by accept the appointment as registered agent and completed in the statutes relative to the proper and completed igations of my position as registered agent as provide reflect a change in the registered office address, it in writing of this change.	agree to act i ele performai ided for in Cl , I hereby cor Corporatio	ice of my du apter 605, i firm that th	ities, and I am F.S. Or, if this e limited liabi	agree to co familiar v s documen lity compa	omply with an it is be iny has	with the d accept ing filed been	
Si	gnatu	re of Registered Agent	Ami M. Ca	isper, Asst.	Vice Preside	ent			