M22000016697

(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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A DUTLER DEC 2 1 2022 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	I20000001	95		
	REFERENCE	:	261644	8316627		
	AUTHORIZATION	:	Jak al) A A		
	COST LIMIT	:	\$ /25.00	era		
	December 19, 202	2				
ORDER TIME :	12:51 PM					
ORDER NO. :	261644-004					
CUSTOMER NO:	8316627					
CHANGE OF AGENT						
NAME: SOUTHWEST ADJUSTERS, 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: SOUTHWEST A	DJUSTE	RS, LLC			
2	(a)	2002 GILL RD	(h	(b) 2002 GILL RD			
.	(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		Mailing address of fimited liability company: (Note: MAY BE POST OFFICE BOX)		
		DICKINSON, TX 77539	DICKIN		ON, TX 77539		
		10/19/2022		M220000	16097		
3. 5	(a)	Date of filing/registration in Florida CT CORPORATION SYSTEM	4.		Document number		
J.	(a)	Registered Agent and Registered Office shown on the records of the 1200 S PINE ISLAND RD	he Florida	Dept, of Stat	te:		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2022		
		PLANTATION , FL	33324		DEC 20		
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Corporation Service Company</u>	Office add	Iress:	2022 DEC 20 PH 1: 03		
		NEW Registered Office Address:			_		
		1201 Hays Street			_		
		Tallahassee	32301		_		
cha age wa	ange ent v s/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the li	egistere pility con the limi	d office an mpany, it is ited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in		
	/S/	Ryan Anthony	Rya	n Anthony,	Authorized Person		
S	ignat	ure of a member or authorized representative of a member			Printed or typed name of signee		
pro the	visi obl	by accept the appointment as registered agent and agre- tions of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I have tin writing of this change.	erforma for in C ereby co	nce of my o hapter 605 nfirm that	duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been		
Sig	natu	re of Registered Agent	race E. I	Cirby, Asst	t. Vice President		