(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:
J. HORNE JUL 1 1 2023

Office Use Only



500405822935

2023 JUL -6 PM 4:2/ SECRETAIN TALLAHASET!

2023 JUL-6 PM 2:1

Incorporating Services, Ltd. -

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656,7953 www.incserv.com

ORDER FORM

TO Florida Department of State **FROM**

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810

850.656.7953

Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 07/06/2023

PRIORITY Routine

OUR REF # (Order ID#) Courtney

ORDER ENTITY

Beyond Green Solutions, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

Beyond Green Solutions, LLC

Please file the attached change of agent.

NOTES:

\$25.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.



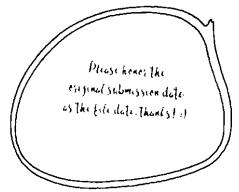
FLORIDA DEPARTMENT OF STATE Division of Corporations

July 7, 2023

INCORPORATING SERVICES, LTD.

SUBJECT: BEYOND GREEN SOLUTIONS, LLC

Ref. Number: M23000000779



We have received your document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

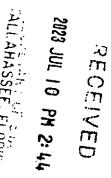
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Jasmine N Horne Regulatory Specialist II

Letter Number: 823A00015081

Please hence the creginal submission date as the file date thanks to



*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)		(b)		
,,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(**)	A	lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	805 Ridge Rd Ste 204 Webster NY 14580		805 Ridge F	Rd Ste 204 Webster NY 14580
	01.04.2023		M230000007	
3.	Date of filing/registration in Florida	4.	i	Document number
5. (a)	Registered Agent and Registered Office shown on the records of			
(b)		of the Florida	Dept. of State:	-
	Corporation Service Company			202 SE: ALL
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			CSS CAST
	1201 Hays Street			2023 JUL -6 SECRETAN ALLAHASSA
	Tallahassee I	FL		• •
	Incorporating Services, Ltd.			THE D
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			P.5
				68
	NEW Registered Office Address:			
	1540 Glenway Drive			
	Tallahassee	FL 32301		
agent v was/we the arti	imited liability company is not organized under the lear changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the Chistophy. Ball	he registered liability cors of the limine limited lis	I office and npany, it is ted liability ability comp	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Signature of a member or authorized representative of a member			Printed or typed name of signee	
I herei provisi the obl to mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ely reflect a change in the registered office address, I in writing of this change	gree to act i ie performa led for in Ci I hereby coi	n this capa uce of my d hapter 605, ifirm that th	city. I further agree to comply with t uties, and I am familiar with and acc F.S. Or, if this document is being fil he limited liability company has been
MUMMER				
n Whe	elock, Assistant Secretary 22 Mach			