## M23000007239

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()	Requestor's Name)			
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	Sin distanta (Tim Pole and Hi			
(0	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
(E	Business Entity Name)			
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	, and the state of			
Certified Copies	Certificates of State	us		
Special Instructions to Fi	ilina Officer:			

Office Use Only



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

. .

ACCOUNT NO. : 12000000195					
REFERENCE : 882564 8416013					
AUTHORIZATION: Spelble man					
COST LIMIT : \$ 25.00					
ORDER DATE : July 18, 2023					
ORDER TIME : 10:55 AM					
ORDER NO. : 882564-010					
CUSTOMER NO: 8416013					
CHANGE OF AGENT					
•					
NAME: REFRIGERATION SERVICES II, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX 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.

1. N	ame of the limited liability company:	ON SER	VICES II, LI	LC
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	7294 RIVER RD		7294 RIV	'ER RD
	LIVE OAK, FL 32060	_	LIVE OAI	K, FL 32060
	06/05/2023		M2300000	7239
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (4)	Registered Agent and Registered Office shown on the records of COGENCY GLOBAL INC.	the Florid	a Dept. of Stat	_ e:
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS	<u> </u>	_
	115 NORTH CALHOUN ST. SUITE 4		_	<b>2023</b> ™ALI
	TALLAHASSEE . FI	32301		FILED  2023 JUL 19 AM 9: 40  SECRETARY OF STATE FALLAHASSEE, FLORIDA
				SSE TO L
(b)	Enter name of NEW Registered Agent and/or NEW Registered	1 Office ad	ldress	AM 9: 4
	and the way the property of th	<u> </u>	<u></u>	ξ <sup>2</sup> Α
	Corporation Service Company			ADA S
	NEW Registered Office Address:			<u>-</u>
	1201 Hays Street			~
	Tallahassee	32301		
change agent v was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registere ability co of the lim limited l	ed office and impany, it is lited liability iability con	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany.
78/ Evan Eachus		Authorized Person		
- Lhere	ture of a member or authorized representative of a member by accept the appointment as registered agent and agr	ree to act	in this capa	Printed or typed name of signee activ. I further agree to comply with the
provisi the obi to mer	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I ld in writing of this change.	performed for in Chereby co	ance of my a Thapter 605 Onfirm that i	duties, and I am familiar with and accept . F.S. Or, if this document is being filed the limited liability company has been
Signatu	ire of Registered Agent			
_	E. Kirby, Asst. Vice President on behalf of Corporation Service Co <b>Division of Corporations • P.O. 1</b>		7• Tailahas	ssee, FL 32314

**FILING FEE: \$25.00** 

INHS18 (2/14)