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SECRETARY OF STATE
TALLAHASSEE, FL

12/13/2022

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Regions Facility Services, INC.
Name of Corporation

DOCUMENT NUMBER: _____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ronald T. Wilhite

Name of Contact Person
Regions Facility Services, INC.

Firm/Company
2314 Circuit Way

Address
Brooksville, FL 34604

City/State and Zip Code
ron.wilhite@Rfsrenovates.com

E-mail address: (to be used for future annual report notification) _____

For further information concerning this matter, please call:

Ronald Wilhite _____ at (844) 737-7366
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)