P12000031893

(Re	equestor's Name)			
(Ac	ddress)			
(Ac	idress)			
70:	NO	- 40		
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	usiness Entity Nar	me)		
(Dc	ocument Number)			
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JQ 09/39/20

COVER LETTER

TO:

Amendment Section Division of Corporations

Glabal Hausakaaning Sarvicas, Inc.		
SUBJECT: Global Housekeeping Services, Inc. Name of Corporation		
DOCUMENT NUMBER: P12000031893		
The enclosed Statement of Change of Registered	d Office/Agent and fee are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Dianna L. Wheeler		
Name of Contact Person		
Professional Workforce, Inc.		
Firm/Company		
316 U.S. Route 1, Suite F		
Address		
York, Maine 03909		
City/State and Zip Code		
dianna@ges-america.com		
E-mail address: (to be used for future annua	l report notification)	
For further information concerning this matter, p	please call:	
Dianna E. Wheeler	at (207)571-8500 Area Code & Daytime Telephone Number	
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	Street Address:	
	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810	
rananassee, p. 52514	Tallahassee, FL 32303	

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	, inge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statu organized under the laws of the State of <mark>Floric</mark> registered agent, or both, in the State of Floric	da		
1. The name of	the corporation: Global Housekeepin	ng Services, Inc.			
2. The principal	office address: 7601 East Treasure I	Drive, Suite 220, North Bay Village, FL 33141			
3. The mailing a	address (if different): 316 U.S. Route	e 1, Suite F. York, Maine 03909			_
4. Date of incor	poration/qualification: 04-03-2012	Document number: P12000031893	3		_
	d street address of the current regist runent of State: (If resigned, enter r	ered agent and registered office on file with the resigned)	ie		
	Corporation Service Company		70	2	
	1201 Hays Street		TALI	020 AUG -5	,
	Tallahassee, Ft. 32230		AA)G -1	
6. The name and (if changed):	d street address of the new registere	ed agent (if changed) and /or registered office	RY OF ST ASSEE,	5 PM 2	200
	Robert Laltoo			:2	
	7601 E. Treasure Drive-Suite 220				
		P.O. Box NOT acceptable			
	North Bay Village, FL 33141				
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its reg	gistered	l agent.	
Such change w authorized by the	as authorized by resolution duly ache board, or the corporation has be	dopted by its board of directors or by an officen notified in writing of the change.	cer so		
Varina	h.Wheeler	Dianna L. Wheeler			
•	re of an officer of difector	Printed or typed name and title			
I further agree of my duties, ar document is be	to comply with the provisions of a nd I am familiar with and accept th	ent and agree to act in this capacity. Il statutes relative to the proper and complet he obligation of my position as registered ago e in the registered office address, I hereby co hange.	ent. Or	r, ii this	ŗ
Talon	leo t le x	July 29, 2020			
Sig	mature of Registered Agent	Date			
If signing on bo	chalf of an entity:				
Robert R. Laltoo					
ï	yped or Printed Name				

* * * FILING FEE: \$35.00 * * *

Make theres payable to Florida Department of State