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C/ 1/24/2023

Trow & Dobbins, P.A.

ATTORNEYS FOR PEOPLE AND BUSINESSES

CHESTER J. TROW, RETIRED

THOMAS J. DOBBINS, ESQUIRE

Via Federal Express

October 25, 2022

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

Re:

Registered Office and Registered Agent for

Citrus Springs Pest Control, Inc.

Dear Sirs/Madam:

Enclosed please find an executed Statement of Change of Registered Office and Registered Agent in regards to the above-referenced company, as well as a check in the amount of \$35.00 as payment for the same. Please process the same accordingly.

Should you have any questions, do not hesitate to contact our office. Thank you for your kind attention and assistance in this matter.

Sincerely,

Thomas J. Dobbins

For Trow & Dobbins, P.A.

TJD/jks

Enclosures: Statement of Change

Check #18336

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

		r registered agent, or both, in the State of Florida.	
	of the corporation: Citrus Springs Pe		
2. The princ	ipal office address: 4343 W. Malaluka	Circle, Citrus Springs, FL 34433	
3. The maili	ng address (if different):		
4. Date of in	neorporation/qualification: 5/23/2012	Document number: P12000048281	
5. The name		stered agent and registered office on file with the	
	Gary C. Simons, Esquire	· · · · · · · · · · · · · · · · · · ·	1
	121 NW 3rd Street	SECKE ASIA	
	Ocala, FL 34475	CT 28) 1 1 1 1 1 1 1 1 1
6. The name (if change	e and street address of the new registered);	ed agent (if changed) and /or registered office	
	Trow & Dobbins, P.A.	E FILLE	<u>-</u>
	1301 NE 14th Street		
	Ocala, FL 34470	P.O. Box, NOT acceptable	
The street ac	ddress of its registered office and the	street address of the business office of its register	red agent.
		dopted by its board of directors or by an officer so	
asttran.	1 St Fand Com	Anthony H. Fongsam	
NE OF THE PERSON NEWSFILM	enature of an officer or director	Printed or typed name and title	
i juriner agr of my duties document is	ept the appointment as registered ag ree to comply with the provisions of a , and I am familiar with and accept to being filed merely to reflect a chang has been notified in writing of this co	ul statutes relative to the proper and complete per he obligation of my position as registered agent. Se in the registered office address: Thereby confin	rformanc Or, if thi n that the
\mathcal{A}		10-25-2022	
	Signature of Registered Agent	Date	
If signing or	n behalf of an entity:		
	bins, P.A.		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314