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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIOA in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: GETER DONE CLEANING SERVICES INC	
2. The principal office address: 566 BARTON BLVD SUITE #2	
ROCKlenge, FL 32955	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 4/16/2014 Document number: P14 0000 34595	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
LLOYD T MCCOY	
566 BARTON BIUD STE #2	
ROCKIEDGE, FL. 32955	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
KIMBERY D THOMAS	
1115 TARPON OR P.O. Box NOT acceptable	
ROCKIENGE FL 32955	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Hoya T. MCOY Vice President Printed or typed name and title	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Signature of Registered Agent 5-20-15 Date	
If signing on behalf of an entity:	
HI KOT	
Typed or Printed Name	

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