P17000 a1a77

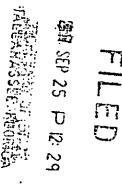
(Requestor's Name)				
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COVER LETTER

TO: Amendment Section Division of Corporations Fresh & Clean Housekeeping Services, Inc. SUBJECT: Name of Corporation P17000021277 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: Audrey E Johns Name of Contact Person Fresh & Clean Housekeeping Services, Inc. Firm/Company 1924 Little Wages Road Address Chipley, FL 32428 City/State and Zip Code FreshClean17@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Audrey E Johns Area Code & Daytime Telephone Number Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617. ange is submitted for a corporation or er to change its registered office or re	rganized under the laws of the State	of Florida
1. The name of 2. The principal	the corporation: Fresh & Clean office address: 1924 Little Wag	Housekeeping Services, jes Road; Chipley, FL 32	Inc 428
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: March, 20	17 Document number: P17	000021277
	d street address of the current register rtment of State: (If resigned, enter resi		e with the
	Gwendolyn P Greene (resigned)	
	2320 Rockford Dr	(OLD)	<u> </u>
	Chipley, FL 32428		
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered	SEP 25
	1924 Little Wages Road	NOT acceptable	
	Chipley, FL 32428	NOT acceptable	~ ₩ 70
The street address changed will	ess of its registered office and the stre be identical.	eet address of the business office o	_
Such change wa authorized by th	as authorized by resolution duly ador- ne board, or the corporation has been	nted by its board of directors or by notified in writing of the change.	an officer so
Quel	ly E Johns ire of an officer or sirrictor	Audrey E Johns, Pres	
I hereby accept I further agree i performance of agent. Or, if the	the appointment as registered agent to comply with the provisions of all s my duties, and I am familiar with an is document is being filed merely to t that the corporation has been notifie	and agree to act in this capacity. Itatutes relative to the proper and countries and countries are the obligation of my posite reflect a change in the registered of	omplete ion as registered
		August 31, 2017	
Sig	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	yped or Printed Name		

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

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