P21000028525

(Requestor's Name)	
(Address)	
(Address)	_
(Addiess)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
Certified Copies Certificates of Status	_
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI Name	ECT: Property Inspect Inc. of Corporation	
DOCU	JMENT NUMBER: P21000028525	
The en	closed 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:
Abby F	Riegler	
	of Contact Person	
Thorel	li & Associates	
Firm/C	Company	
70 W.	Madison St., Suite 5750	
Addres	SS	
Chicag	o, IL 60602	
City/Si	tate and Zip Code	
	abby@thorelli.com	
E-mai	l address: (to be used for future annua	l report notification)
For fur	rther information concerning this matter, p	please call:
Abby I	Riegler	at (312) 357-0300
	Name of Contact Person	at (312) 357-0300 Area Code & Daytime Telephone Number
Enclos	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for	a corporation organi	2, 607.1308, or 617.1308 ized under the laws of the	e State of Florida	
	-		red agent, or both, in the	e state of Fioriaa	
1. The name of t	he corporation: Pro	perty Inspect Inc.		<u>.</u>	
2. The principal	office address: 2315	Virginia Drive, Orland	10, FL 32103		
	ddress (if different)				
4. Date of incorp	oration/qualificatio	n: March 23, 2021	Document number:	P21000028525	
5. The name and	street address of th		gent and registered office	on file with the	
	Ray Costello				
	2315 Virginia Drive	e, Orlando, FL 32103			
					70
6. The name and (if changed):	I street address of th	e new registered agen	it (if changed) and /or reg	gistered office	2022 SEP -1 AM 7:5
	Corporation Service	Company		: 	==
	1201 Hays Street, T	allahassee, FL 32301			<u> </u>
		P.O. Box	NOT acceptable		53
-			address of the business of		
Such change was authorized by the	as authorized by res he board, or the con	solution duly adopted poration has been no	by its board of director tified in writing of the c	s or by an office hange.	r so
the	7. H.	Νĺ	Thomas H. Thorelli, Se	-	
17	re of an officer or director		- •	d name and title	7'' '
I further agree of my duties, ar document is bei	to comply with the l nd I am familiar wil ing filed merely to r	nrovisions of all state	d agree to act in this cap ites relative to the prope gation of my position as e registered office addre	er and complete.	performance it. Or, if this firm that the
Sig	mature of Registered Agen	- Hamy & Sain	8/30/21 	ate	
If signing on be	chalf of an entity:	/			
Corporation Ser	vice Company	Harry B Davis A	sst VP		
· Т	yped or Printed Name	* * * FILING FE	F· \$35 AA * *		
		A LUMITO I'E			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)