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Electronic Filing Cover Sheet

(((H23000416370 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number

: (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

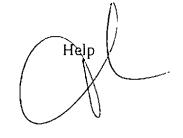
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REGISTERED AGENT CHANGE SOUTHLAND HOME INSPECTIONS CORP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu



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

To: 18506176380

statement of cha	nge is submitted for a corporation or	0502, 607,1508, or 617,1508, Florida Statutes, to ganized under the laws of the State of <mark>Florida</mark> gistered agent, or both, in the State of Florida.	his ———				
1. The name of t	he corporation: Southland Home Inspe	ections Corp					
2. The principal							
4. Date of incorp	poration/qualification: 12/06/22	Document number: P22000090300					
5. The name and		ed agent and registered office on file with the					
	REPUBLIC REGISTERED AGENT LLC	3					
	1150 NW 72ND AVE TOWER I STE 45	55	2023				
	MIAMI, FL 33126		2023 DEC - 6				
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office Registered Agents Inc						
	Registered Agents Inc		9.				
	7901 4th St N STE 300		ັ້ນ				
	P.O. Box NOT acceptable						
	St. Petersburg FL 33702						
The street addre as changed will	ess of its registered office and the str be identical.	cet address of the business office of its register	ed agent,				
Such change wa authorized by th	is authorized by resolution duly adop ne board, or the corporation has been	pted by its board of directors or by an officer so inotified in writing of the change.)				
Robert	to a support of directory	Robin Jones Printed or typed name and title					
I hereby accept I further agree t of my duties, and document is bei	the appointment as registered agent to comply with the provisions of all s d I am familiar with and accept the	statutes relative to the proper and complete per obligation of my position as registered agent (or the registered office address, I hereby confirm	Or. II this				
Dail Kelens	•	12/6/2023					
Sign	nature of Registered Agent	Date					
If signing on bel	half of an entity:						
David Roberts							
Ту	yped or Printed Name						