P95000024477

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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CORPORATE ACCESS,

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066)

(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

		PICK UP:	2/11 MEGHAN			
		CERTIFIED COPY				
	XX	РНОТОСОРУ				
		CUS				
	XX	FILING	CHANGE OR RA			
1.		HANDYMAN HOME REPAIR SERVICE OF PINELLAS, INC. (CORPORATE NAME AND DOCUMENT #)				
2.						
		(CORPORATE NAME AND DOCUMEN	T #)			
3.		(CORPORATE NAME AND DOCUMEN	TC #1			
4.		Technical II. Mani. And December	ι π/			
·r.		(CORPORATE NAME AND DOCUMEN	TI #)			
5.		(CORPORATE NAME AND DOCUMEN	'T' #\			
6.		CORPORATE, NAME, AND DOCUMEN	1 11)			
υ.		(CORPORATE NAME AND DOCUMEN	T'#)			
SPF	ECIAI	LINSTRUCTIONS:				
						

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

statement of cha	nge is submitted for a corporation	organized under the laws of the State of <mark>FL_</mark> registered agent, or both, in the State of Flor		
1. The name of t	he corporation: HANDYMAN HON	ME REPAIR SERVICE OF PINELLAS, INC.		
2. The principal	office address: 11327-43 STREET N	ME REPAIR SERVICE OF PINELLAS, INC. NORTH CLEARWATER, FL 34622		_
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 03/24/1995	Document number: P950000244	72	
	street address of the current registement of State: (If resigned, enter re	ered agent and registered office on file with tesigned)	the	
	TELOS LEGAL CORP.			
	155 OFFICE PLAZA DRIVE			
	TALLAHASSEE. FL 32301	A L	2025 FEB 11	-1.}
6. The name and (if changed):	street address of the new registere	d agent (if changed) and /or registered office	B = 7	下川
	James K. Allbritten		PM 12: 09	O
	11327-43 STREET NORTH			
	CLEARWATER, FL 34622	P.O. Box NOT acceptable	D	
	ess of its registered office and the sbe identical.	street address of the business office of its re		gent,
Such change wa authorized by th	is authorized by resolution duly ac ie board, or the corporation has be	dopted by its board of directors or by an offer notified in writing of the change.	ncer so	
	Rel Cain	Rachel Cain, Director of Risk Manage	ment	
I hereby accept I further agree to of my duties, an document is bei	the appointment as registered age the appointment as registered age to comply with the provisions of a d I am familiar with and accept th ng filed merely to reflect a change been notified in writing of this cl	Printed or typed name and title ent and agree to act in this capacity. Il statutes relative to the proper and comple ne obligation of my position as registered a e in the registered office address, I hereby capacity.	ete perforn gent. Or, i confirm tha	nance if this ut the
/s/ James K	Allbritten	2/10/2025		
	nature of Registered Agent	Date		
If signing on be	half of an entity:			
James K. Allbritt				
T	sped or Printed Name			

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