Name and Address of Current Registered Agent.					
MARSHALL, JOHN 4887 BELFORT ROAD, SUITE 400 JACKSONVILLE, FL 32256 US					
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
	SIGNATURE:	JOHN MARSHALL		0	1/11/2021
		Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :					
	Title	MANAGER	Title	MGR, PRESIDENT, CEO	
	Name	IVEY, DAVID	Name	MARSHALL, JOHN R	
	Address	4887 BELFORT ROAD, SUITE 400	Address	4887 BELFORT ROAD, SUITE 400	
	City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256	
	Title	MANAGER	Title	MANAGER	
	Name	STITGEN, DUSTIN	Name	DAHL, ALAN	
	Address	4887 BELFORT ROAD, SUITE 400	Address	4887 BELFORT ROAD, SUITE 400	

JACKSONVILLE, FL 32256 US

4887 BELFORT ROAD, SUITE 400

Current Principal Place of Business:

FEI Number: 20-5446343

DOCUMENT# M1200003265

Entity Name: HOMEASAP LLC

4887 BELFORT ROAD, SUITE 400 JACKSONVILLE, FL 32256

Current Mailing Address:

Name and Address of Current Registered Agent:

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN R MARSHALL

City-State-Zip: JACKSONVILLE FL 32256

PRESIDENT/CEO

City-State-Zip: JACKSONVILLE FL 32256

01/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 11, 2021 Secretary of State 0467919873CC

Certificate of Status Desired: No

Date