

**STATE OF SOUTH CAROLINA  
SECRETARY OF STATE**

**NOTICE OF CHANGE OF (1) DESIGNATED OFFICE, (2) AGENT FOR SERVICE OF  
PROCESS, OR (3) ADDRESS OF AGENT  
LIMITED LIABILITY COMPANY – DOMESTIC AND FOREIGN**

Pursuant to the 1976 S.C. Code of Laws, as amended, §33-44-109, the limited liability company submits the following statement of change.

1. The name of the limited liability company is:

INTERIOR BUSINESS SERVICES LLC

2. The limited liability company is (check either "a" or "b", whichever is applicable):

- ☒ a. A South Carolina limited liability company.  
☐ b. A foreign limited liability company authorized to transact business in South Carolina.

3. a. The South Carolina street address of the current designated office for the limited liability company is:  
112 cherokee ridge dr

(Street Address)

Elgin, South Carolina 29045

(City, State, Zip Code)

- b. The name of the company's current agent for service of process is:

TARIKA TAYLOR

(Name)

- c. The South Carolina street address of the current registered agent's office is:  
112 CHEROKEE RIDGE DR

(Street Address)

ELGIN, South Carolina 29045

(City, State, Zip Code)

4. Check and complete all boxes (a-c) that apply.

- ☒ a. The company is changing the address of its designated office.

The new South Carolina address of the designated office of the limited liability company is:  
10711-A Wilson Blvd.

(Street Address)

Blythewood, South Carolina 29016

(City, State, Zip Code)

INTERIOR BUSINESS SERVICES LLC

Name of Limited Liability Company

- ☒ b. The company is changing its agent for service of process.

The name of the company's new agent for service of process is:

Taricka Taylor

(Name)

I hereby consent to the appointment as registered agent.

Taricka Taylor

(Agent's Signature)

- ☒ c. The company is changing the street address of the agent for service of process.

The new South Carolina street address of the registered agent's office is:  
10711-A Wilson Blvd.

(Street Address)

Blythewood, South Carolina 29016

(City, State, Zip Code)

5. Unless otherwise specified, these articles are effective when endorsed for filing by the Secretary of State. Specify the time and date of any delayed effective date \_\_\_\_\_  
(Date)

Date: 09/27/2017

Signed as Authorized Signature: taricka taylor

(Signature)

Taricka Taylor

(Print Name)

Capacity/Position of Person Signing (You must check one box.)

☐ Manager ☐ Member ☒ Organizer

☐ Fiduciary ☐ Attorney-in-Fact