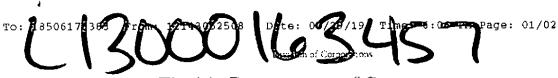
7/29/2019



Florida Department of State

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LLC REGISTERED AGENT CHANGE **E&O FLOORS, LLC**

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(((H19000227185 3)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

L. Na	me of the limited liability company: E&Q FLOOR	IS, LLC	
2. (a)	3580 NW 54th st, bay 5225	(b) 3580 l	NW 54th st, bay 5225
L. (M)	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33142	MIAMI	, FL 33142
	11/21/2013	L13000	163457
3.	Date of filing/registration in Florida	<u> </u>	Document number
5. (a)	PEREZ-ABREU, AGUERREBERE, SUEIRO	O & TORRES	
J. (A)	Registered Agent and Registered Office shown on the records of 3580 NW 54th st	the Florida Dept of S	tale.
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	_ υ ຊ
	bay 5225		TA TA
	MIAMI , FI	33142	2019 JUL 30 PM 1: SECRETARY OF ST TALLAHASSEE.
(b)	LEGALINC CORPORATE SERVICES INC.		O P
(0,)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address	
	5237 SUMMERLIN COMMONS BLVD, SU	ITE 400	PR I: 44 ASSEE, FL
	NEW Registered Office Address.		
	FORT MYERS , FI	L_33907	
the cha agent to was/w	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	iws of the State of if the registered off iability company, i of the limited liabi e limited liability e	hee and the business office of the registered it is hereby confirmed that the change(s) filty company or as otherwise provided in
	Sugnature of a member-oranimo yell representative of a member		Printed or typed name of signee
provis the ob to mer	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.	gree to act in this c e performance of n ed for in Chapter (hereby confirm th	apacity. I further agree to comply with the my duties, and I am familiar with and acceptions, F.S. Or, if this document is being filed at the limited liability company has been
Signati	ire of Registered Agent		
J	Division of Corporations P.O.	Roy 6327 a Tallal	hassee El. 32314

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FHANG FEE: \$25,00