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n. SCOTT

7 2017

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.

Name of the limited liability company: PES CAPITAL PARTNERS, LLC					
2. (a)	150 E PALMETTO PARK RD		150 E PALMETTO PARK RD		
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	BOCA RATON, FL 33432		BOCA RATON, FL 33432		
	01/14/2014	Egil.	L14000007583		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	5. (a) CORPORATION SERVICE COMPANY (resigned)				
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	1201 HAYS STREET				
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			
	TALLALIAGOEE	60564			
	TALLAHASSEE , FL_	32301			
n.s	Desistered Agento Inc				
(1)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered Company and/or N	Office address:			
	3030 N. Rocky Point Dr.				
	NEW Registered Office Address:				
	STE 150A		<u> </u>		
			97 7		
		33607.	22		
the cha agent v	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization on the operating agreement of the law.	s of the State of the registered off bility company, if the limited liabi	Florida, it is hereby confirmed that after ice and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in		
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee		
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.					

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00