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MOULTON MCEACHERN & WALKER

ATTORNEYS AT LAW

BANK OF AMERICA BUILDING 5041 BAYOU BOULEVARD, SUITE 300 PENSACOLA, FLORIDA 32503 www.pensacolalegal.com TELEPHONE (850) 969-3151 FACSIMILE (850) 969-0566 Writer's e-mail address: jstair@pensacolalegal.com

VIA FEDERAL EXPRESS

August 20, 2013

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: ESB Holdings, LLC

Dear Sir or Madam:

Under cover of this letter for filing in your office are the following:

- 1. Cover Letter and Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company. *Please file this document first*.
- 2. Limited Liability Company Reinstatement.

Also under cover of this letter is a check in the amount of \$957.50 for the filing fee as follows:

- 1. \$25.00 for the Change of Registered Agent.
- 2. \$100.00 for the Reinstatement fee.
- 3. \$832.50 for the filing fee for the annual reports from 2008 to 2013 inclusive.

Please call us if you have any questions or need any additional information. Thank you.

Very truly yours,

Janna F. Stair, Assistant to Wright Moulton, Attorney

WM/jfs Enclosures

cc: Wright Moulton, Attorney

Dorothy K. Galloway

F -KAHN, ROBERT H-ESB Holdings, LLC letters\tr Secretary of State 8 20 13 doc

COVER LETTER

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	Please
TO: Registration Section Division of Corporations	file this
SUBJECT: ESB HOLDINGS, LLC	first
Name of Limited Liabil	lity Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Wright Moulton	
Name of Person	
Moulton McEachern & Walker	" mag
Firm/Company	— इंटिंग्स
5041 Bayou Boulevard	AUG 2
Address	
Pensacola, FL 32503	- S
City/State and Zip Code	
d1436@cox.net	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call	:
Wright Moulton at (850	969-3151
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: MA	AILING ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

□ \$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

1. Name of the limited liability company: ESB HOLD	DINGS, LLC
2. (a) Principal office address of limited liability c (<i>Note: MUST BE STREET ADDRESS</i>)	company: 320 West Lee Street Pensacola, FL 32501
(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	y:
02/22/2001	L01000002867
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sho	ా ప
Registered Agent:	Robert H. Kahn, Jr.
Registered Office Address:	320 West Lee Street Pensacola, FL 32501
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Dorothy Kahn Galloway 2757 Bayou Boulevard
	Pensacola ,FL 32503
If the limited liability company is not organized unconfirmed that after the change or changes are mad and the business office of the registered agent will liability company, it is hereby confirmed that the change of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company or as the operating agreement of the limited liability company. Signature of a member or authorized representative of a member of a	le, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote of otherwise provided in the articles of organization or
Printed or typed name of signee	
I hereby accept the appointment as registered agest comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, thereby confirm that the limited liability of Signature of Registered Agent	nt and agree to act in this capacity. I further agree to o the proper and complete performance of my duties, of my position as registered agent as provided for in ed to merely reflect a change in the registered office company has been notified in writing of this change.

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