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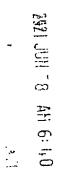
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O SIMMONS
JUL 13 2021

## **COVER LETTER**

TO: Registration Section Division of Corporations	
E.S. WINDOWS, LLC SUBJECT:	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
EDUARDO GONZALEZ	
Name of Person	<del></del>
FLORIDA CORPORATE REGISTERED AGENTS, LLC.	
Firm/Company	
8323 NW 12 STREET, SUITE 102	
Address	<del>- · · · · · · ·</del>
DORAL, FL 33126	
City/State and Zip Code	<del>· · · · ·</del>
E.GONZALEZ@GRC-CPA.COM	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
EDUARDO GONZALEZ 30	5 477-6969
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount	:
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

## 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.

1. Na	ame of the limited liability company: E.S. WINDOWS	/S. LLC
2. (a)	3550 NW 49TH STREET	(b) 10653 NE QUAYBRIDGE CT, SUITE # C2
( <del>u</del> )	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	MIAMI, FL 33142	MIAMI. FL 33138
	10/22/2003	L03000040544
3.	Date of filing/registration in Florida	4. Document number
5. (a)	ROBLEDO, ANTHONY	
5. (a) (b)	Registered Agent and Registered Office shown on the records o	of the Florida Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET) 3901 NW 79TH AVENUE, SUITE 104	
	DORAL, F	FL_33166
	FLORIDA CORPORATE REGISTERED AGENTS, LLC	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	red Office address:
		. 6.
	NEW Registered Office Address:	
	8323 NW 12 STREET, SUITE 102	·
	DORAL F	FL_33126
change agent v was/we	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li	laws of the State of Florida, it is hereby confirmed that after he registered office and the business office of the registered liability company, it is hereby confirmed that the change(s) is of the limited liability company or as otherwise provided in limited liability company.  EDUARDO GONZALEZ
Sjerie	the of a member or authorized representative of a member	Printed or typed name of signee
I herei provisi the obl to mere notified	by accept the appointment as registered agent and ag	gree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accided for in Chapter 605, F.S. Or, if this document is being fil I hereby confirm that the limited liability company has been