Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC REGISTERED AGENT CHANGE EES3, LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

FEB 2 4 2015

C. CARROTHI

C	over letter
TO: Registration Section Division of Corporations	
SUBJECT: EES3, LLC	
Name of L	imited Liability Company
Dear Sir or Medem:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filling.
Please return all correspondence concerning this matt	er to the following:
Kenneth Kooş	
Name of Person	
EES3, LLC	
Firm/Company	
91B2 Wilderness Passage	
Address	
Chagrin Falls, OH 44023	
Citý/State and Zip Code.	
ekk@omtlic.net	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, please	e call:
Peggy Routzahn	215 399-9450
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, Florida 32314
Enclosed is a check for the following amor	ant:
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Centified 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 603.0114 or 603.0116, 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.

(Reist ARST BE STREET ADDRESS) P182 Wilderness Passage Chagrin Fulls, OH 44023 Chagrin Fulls,	Principal office address of limited liability company:	(b)
Chagrin Falls, OH 44023 Chagrin Falls, OH 44023 L03000047583 Date of filing/registration in Florida 4. Document number L.M. Ploucha, Esquire c/o Fowler White Boggs P.A. Registered Agent and Registered Office shown on the records of the Florida Dept of Sinto: L.M. Ploucha, Esquire c/o Fowler White Boggs P.A. Registered Office Address (AUST RR FLORIDA STREET ADDRESS) 1200 East Las Olas Blvd, Ste 500 Fort Lauderdals FLORIDA STREET ADDRESS) Patter name of NEW Registered Agent and/or NEW Registered Office address: 1200 South Pice Island Road Plantstion Filing Company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Plantida street address of the registered affice and the business office of the registered nineline in will be identical. Or, in the case of a Florida limited liability company or as otherwise provided in articles of organization or the operating agreement of the limited liability company or as otherwise provided in articles of organization or the operating agreement of the limited liability company or as otherwise provided in articles of organization or the operating agreement of the limited liability company or as otherwise provided in articles of organization or the operating agreement of the limited liability company. E. K. Koos, Manager France or submixed expressibility of a member France or type of a most firm of the proper and complete performance of any duffes, and it on familiar with and accept only or refer or a change is the registered agent as provided for in Chapter 503, F.S., Or, if this document is being filled. The chapter of the proper and office address, a hereby couling the limited liability company has been submixed than the chapter of the complete of the couling of the limited liability company has been submixed of the couling of the co		
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