## L050000 81696

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## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJI	PES Holdings LLC				
	Name of Limited Liability Company				
Dear S	ir or Madam:				
The cn	sclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning this ma	atter to the following:			
JOH	N SEARCY				
	Name of Person				
PES	HOLDINGS LLC				
	Firm/Company				
4030	CHICKASAW DR				
	Address				
SANF	FORD/FL 32765				
	City/State and Zip Code	47.37			
JSEA	ARCY1@CFL.RR.COM				
E	E-mail address: (to be used for future annual r	report notification)			
For fur	ther information concerning this matter, plea	ise call:			
JOHN	N SEARCY	407 678 - 1729			
-	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 Tallahassee, Florida 32314			
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. N	lame of the limited liability company: PES HOLDIN	IGS LLC	
2. (a)	E704 CDOSC FOX LN OVIEDO EL 22765	(b) SAME	
( <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)
	4030 Chickasaw Drin	/e	
	Sanford, FL 32771-70	<u> </u>	
	08/17/2005	L050000	081696
3.	Date of filing/registration in Florida	4.	Document number
5. (a	)		_
	Registered Agent and Registered Office shown on the records of JOHN A. SEARCY	the Florida Dept. of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	_
	5721 CROSS FOX LANE		
	OVIEDO ,FL	32765	- - -
(L)			
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
	JOHN A. SEARCY		
	NEW Registered Office Address:		- \$. <b>~</b>
	4030 CHICKASAW DRIVE		_
	SANFORD	32771	_
the chagent was/w	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the law of a member or authorized representative of a member	the registered office ability company, it of the limited liabili	the earn the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Sign	ature of a member or authorized representative of a member	<del></del>	Printed or typed name of signee
provis the ob to me	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ted in writing of this change.	ree to act in this cap performance of my d for in Chapter 60 hereby confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
<u> </u>	John A Searcy		
aignat	ure of Registered Agent		