# 114000067759

(Requestor's Name)				
	(Address)			
(Address)				
	(City/State/Zip/Phone #)			
PICK-UP	P WAIT	MAIL		
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of 9	Status		
Special Instructions to Filing Officer:				
- Office Use Only				



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NOTE THE ANIO: 2

2021 OCT 18 PM 2: 52

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### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

## incserv

#### **ORDER FORM**

The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303

corphelp@dos.myflorida.com 850-245-6051 FROM | Melis

Melissa Moreau mmoreau@incserv.com 850.656.7953

**REQUEST DATE** 10/18/2021

**PRIORITY** Regular Approval

OUR REF\_#\_(Order\_ID#) 960679

ORDER ENTITY\_\_\_\_

CES ENGINEERING SERVICES, LLC

PLEASE PERFORM THE FOLLOWING SERVICES: CES ENGINEERING SERVICES, LLC (FL)
File the attached change of agent document
NOTES:
\$25.00 Authorized
Email address for annual report reminders: professional@harborcompliance.com
RETURN/FORWARDING INSTRUCTIONS: ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, October 18, 2021 Page 1 of 1

## 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	me of the limited liability company: CES Engine	eering Servi	ces, LLC
2	(a)	2937 NW 62nd St STE 102	(b) 811 Middle Street	
۷.	(α)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Ft. Lauderdale, FL 33309	Middleto	own, CT 06457
		4/25/2014	L14000	067759
3.		Date of filing/registration in Florida	4.	Document number
5	(a)	BUSINESS FILINGS INCORPORATED		
٥.	(4)	Registered Agent and Registered Office shown on the records of th	e Florida Dept. of Sta	te:
1200 South Pine Island Road				
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	_
		Plantation ,FL	33324	_
	(h)	Registered Agents Inc.	7	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			7021 C	
		7901 4th St N		
		NEW Registered Office Address:		TAKE B ITT
		STE 300		
		St. Petersburg , FL	33702	AMIO: 22 CE STATE SEE, FL
the ag	e cha gent v as/we e arti	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 cles of organization or the operating agreement of the lawy of a member of authorized representative of a member	the registered office bility company, it fithe limited liability comments in the limited liability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
I pr	here ovisi e obl mer tifje	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my estimate as provided ely reflect a change in the registered agent as provided in writing of this change.  Bill Havre - Assistant re of Registered Agent	performance of my for in Chapter of ereby confirm tha	pacity. I further agree to comply with the vauties, and I am familiar with and accept 15. F.S. Or, if this document is being filed the limited liability company has been