## U500000345

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

D. BRUCE MAY 24 2017

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Epoch REI, LLC		
Name of L	imited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Cha	ange and fee(s) are submitted for filin	g.
Please return all correspondence concerning this matter	er to the following:	
Mandy Theobald		
Name of Person		
KKOS Lawyers		
Firm/Company		
1883 W. Royal Hunte Dr. Suite 200		ZOZ TAL
Address		2021 HAY 19 SECRETARY ALLAHASSE
Cedar City, UT 84720		TARY ASSE
City/State and Zip Code		E 97 S
Mandy@kkoslawyers.com		P # 48 OF STATE . FLORIDA
E-mail address: (to be used for future annual rep	port notification)	A C
For further information concerning this matter, please	call:	
Mandy Theobald	435 586-9366	
Name of Person	Area Code & Daytime Tele	ephone 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	nt:	
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Cop	ру
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	ame of the limited liability company: Epoch REI, I	LLC	
2. (a)	986 Haas Ave NE Palm Ray EL 32907	(b) 98	36 Haas Ave NE Palm Bay, FL 32907
<b>-</b> . ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
3.	5/21/2015  Date of filing/registration in Florida  Legalinc Corporate Services, Inc.	 L150 4.	000090345  Document number
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:
(b)	,	33907	FILED  2021 MAY 19 P 4:  SECRETARY OF STA  TALLAHASSEE. FLORE
	NEW Registered Office Address:		RIDA
	986 Haas Avenue NE		
	Palm Bay, FL	32907	
the cha agent v was/we the arti Signa I here provisi the obli	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the turne of a member of authorized representative of a member by accept the appointment as registered agent and agricular of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I is din writing of this change.	the registered ability compar of the limited I limited liabili Keith Nu	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.  Igent  Printed or typed name of signee
Signatu	re of Registered Agent		

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

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2. (4	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	5/21/2015	L15000	0090345
3.	Date of filing/registration in Florida	4.	Document number
5. (a	.Legalinc Corporate Services, Inc.		
`	Registered Agent and Registered Office shown on the records of t	the Florida Dept. of S	State:
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)	—
	Fort Meyers ,FL	33907	TALLAHA
(b)	Enter name of NEW Registered Agent and/or NEW Registered  Keith Nugent	Office address:	FILED  I MAY 19 P # 4  CORETARY OF STATE  LAHASSEE, FLORIG
	NEW Registered Office Address:		— Off <b>6</b>
	986 Haas Avenue NE		
	Palm Bay, FL	32907	
the ch agent was/v	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the limited liability.	the registered of bility company, f the limited liab	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.
Sign	ature of a member of authorized representative of a member		Printed or typed name of signee
I here provis the ob to me notific	eby accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided rely reflect a change in the registered office address, I he ed in writing of this change.	ee to act in this c performance of n I for in Chapter ( ereby confirm th	••
Signat	ure of Registered Agent		

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