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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status					
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)				
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Special Instructions to Filing Officer:	Certified Copies Certificates of Status				
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A EUTITE OCT 2 U 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO.	:	120000001	95
REFERENCE	:	996901	8388342
AUTHORIZATION	:	Lovell of	eran
COST LIMIT	:	\$(25.00	7,000
ORDER DATE : October 7, 2022			
ORDER TIME : 9:56 AM			
ORDER NO. : 996901-008			
CUSTOMER NO: 8388342			
CHANGE OF A	.GENT	<u>r</u>	
NAME: 330 NAPLES LL	ıC		
PLEASE RETURN THE FOLLOWING AS	PRC	OOF OF FILL	NG:
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Eyliena Baker		EXT#	

EXAMINER:

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.

Name of the limited liability company:	ES LLC	
(a) 633 9th Street N, Suite 301	(b) 34	40 9th Street N, PMB 267
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Naples, FL 34102	Na	ples, FL 34102
09/07/2016	L160	000165443
Date of filing/registration in Florida	4.	Document number
(a) Legalinc Corporate Services Inc.		
Registered Agent and Registered Office shown on the recor	rds of the Florida Dept.	. of State:
476 Riverside Avenue		
Registered Office Address (MUST BE FLORIDA STR	EET ADDRESS)	
Jacksonville	32202	
	_, FL	
a.		
(b) Enter name of NEW Registered Agent and/or NEW Regis	stered Office address:	
Corporation Service Company		
NEW Registered Office Address:		
1201 Hays Street		
Tallahassee	32301	
- and rassee	_, FL	
ne limited liability company is not organized under the nge or changes are made, the Florida street address of an will be identical. Or, in the case of a Florida limited where authorized by an affirmative vote of the member articles of organization or the operating agreement of	f the registered offi ed liability compan ers of the limited li	ice and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in
s/ Jill Cilmi	Jill Cilmi,	Authorized Person
gnature of a member or authorized representative of a member	-	Printed or typed name of signee
ereby accept the appointment as registered agent and visions of all statutes relative to the proper and comp obligations of my position as registered agent as proverely reflect a change in the registered office addressified in writing of this change.	lagree to act in thi lete performance of vided for in Chapte s, I hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and acceper 605, F.S. Or, if this document is heing filed a that the limited liability company has been
l M L est	Corporation Se	ervice Company
nature of Registered Agent	 Ami M. Casper 	r, Asst. Vice President