## 100018172

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





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## COVER LETTER

	Division of Corporations		
SUBJEC	T:EPRO 360 44C		
.,,,,,,,,,	Name of Limi	ited Liability Company	
Dear Sir o	or Madam:		
The enclo	osed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.	
Please ret	turn all correspondence concerning this matter t	to the following:	
F	ERANCISCO ROBRIGUEZ G	ALUEZ	
	Name of Person		
	EPRO 360 LLC	_	
	Firm/Company		3 3 3 1
//	155 TOWN AND FOUR PARKWA	Y Shur	_i 
	Address		Ö
	CREVE COEUR, 63136	7.	10:01 Kg
	City/State and Zip Code	<del></del>	=
	FRANCISCO ROGAL à GMAIL. CO	»M	
E-m	nail address: (to be used for future annual report	t notification)	
For furthe	er information concerning this matter, please ca	ill:	
	FRANCISCO all	636 734 4605	
~	Name of Person	636 ) 734 4605  Area Code & Daytime Telephone Number	
R D C 20	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
E	Enclosed is a check for the following amount:	:	
_	□ \$25 Filing Fee	S55 Filing Fee & Certified Copy	
INHS18 (2	2/14) + AS HENTIONED IN A	PRÉVIOUS PACÉ, A \$35 CHECK WAS BRIGINAL MALL.	



September 20, 2018

FRANCISCO RODRIGUEZ GALVEZ EPRO 360 LLC 1155 TOWN AND FOUR PARKWAY CREVE COEUR, MO 63141

SUBJECT: EPRO 360 LLC Ref. Number: L17000181721

We have received your document for EPRO 360 LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Partnership or Limited Liability Limited Partnership, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 318A00019666

Diane Cushing Senior Section Administrator

RECEIVED

OCT 16 PM 12: 5

## 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.

2. (a)	me of the limited liability company: EPRO  1155 TOWN AND FOUR PARKWAY DRIVE	(h)	717	BRICKELL AVE.	# 500 - 90 3H
2. (a) .	Principal office address of limited fiability company:  (Note: MUST BE STREET ADDRESS)	_ (b) _	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	CREVE COEUR, 63141, MISSOURI		MIAM	1, Fc, 33131	
	08/25/2017			Z17000181	721
3.	Date of filing/registration in Florida	4.	•	Document number	
5, (a)					
., (u)	Registered Agent and Registered Office shown on the records of th	e Florida De	pt. of State	!.	
	LEGALINC CORPORATE SERV	11005 1	NC		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)			<b>≓</b> ≦0.
	5237 SUHHERLIN COMMONS	S SUIT	€ 40	0	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	FORT MYERS ,FL	339	07		日 5 円 3 円 3 円 3 円 3 円 3 円 3 円 3 円 3 円 3 円
(b)	OSWALDO LEONCIO CHAVEZ LO		10 : 21 11d		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office addres	<u>\$</u> :		2: 0
	91/3 SW 72 nd Ave. Apt. 0.	- 4	·		
	NEW Registered Office Address:				
	PINECREST				
	FL	3315	6		
ica. u	mited liability company is not organized under the law			rida ji je haraku asuf	irmed that after

the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member FRANCISCO RODRIGUEZ GALLEZ Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent