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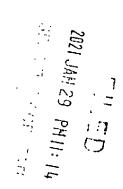
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	MAIT	MAIL
(Bı	siness Entity Nam	ne)
(Do	ocument Number)	_
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		





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(a) (10) 21

COVER LETTER

Division of Corporations	
ERC MODULAR LLC SUBJECT:	
Name of Limite	ed Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change	and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to	the following:
ARTHUR C. KOSKI	
Name of Person	
LAW OFFICE OF ARTHUR C. KOSKI, P.A.	
Firm/Company	
101 NORTH FEDERAL HIGHWAY, STE 602	
Address	
BOCA RATON, FL 33432	
City/State and Zip Code	
AKOSKI@KOSKILAW.COM	
E-mail address: (to be used for future annual report i	notification)
For further information concerning this matter, please call	:
ARTHUR C. KOSKI 561 at (362-9800
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

INH\$18 (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: ERC MODULAR	LLC ————	
2. (a)	101 M REINERAL HIGHWAY STE 602	(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)
	BOCA RATON, FLA 33432		
	JUNE 25, 2020		0000184146
3.5. (a)	Date of filing/registration in Florida ARTHUR C. KOSKI	4.	Document number
1 **	Registered Agent and Registered Office shown on the records of TAX CONSEQUENCES OF RELATED BUSINESS	the Florida De	·
	Registered Office Address (MUST BE FLORIDA STREET) 602	ADDRESS)	2021 JAN
	BOCA RATON , FI	33432	
(b)	Enter name of NEW Registered Agent and/or NEW Registered ARTHUR C. KOSKI, ESQUIRE	l Office addres	PHII: 14
	NEW Registered Office Address: 101 NORTH FEDERAL HIGHWAY, SUITE 602		
	BOCA RATON FL	33432	
chang agent was/w the arr	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited listere authorized by an affirmatife vote of the members of icles of organization or the operating agreement of the independent of the appointment as registered agent and agricums of all statutes relative to the proper and complete ligations of my position as registered agent as provided by effect a change in the registered office address. It is a virting of this diamete.	registered of ability compositive limited liability and limited liability and limited liability limited liability limited liability limited liability limited liability liabilit	office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in lity company. RTAUL (Finted or typed name of signee this canacity. I further carries to comply with the

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