h2100039002

(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:									

Office Use Only



400390852344

07/19/22--01039--003 **25.00

2022 JUL 18 PH 1: 57

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJE	ECT: ERES, LLC, a Florida Limit					
	Nai	ne of Limite	d Liability Company			
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Of	fice Change	and fee(s) are submitted for filing.			
Please	return all correspondence concerning th	nis matter to	the following:			
KRIS	TEN CARTER					
	Name of Person					
PARA	ACORP INCORPORATED					
	Firm/Company					
2804	GATEWAY OAKS DRIVE #100					
-	Address					
SACF	RAMENTO, CA 95833			<u>.</u>	202	
	City/State and Zip Code			:	2022 JUL 18	-12
PARA	ACORP@MYPARACORP.COM				<u>-</u>	1
13	-mail address: (to be used for future an	nual report r	notification)	(), T	70	1 1
For fur	ther information concerning this matter	, please call	:	ing.) PH 1:5	C
KRIS	TEN CARTER	at (800	533-7272		7	
	Name of Person		Area Code & Daytime Telephon	e 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 followin	g amount:				
	☑ \$25 Filing Fee	ַ	1 \$55 Filing Fee & Certified Copy			

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. Na	ame of the limited liability company: ERES, LLC,	a Flori	da Limited	Liability Compa	any 			
2. (a)	ERES, LLC, a Florida Limited Liability Comp	ar	b) ERES,	LLC, a Florida l	_imited	l Liab <u>il</u>	ity Cor	
,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)			Mailing address of fimited liability company: (<u>Note: MAY BE POST OFFICE BON</u>)				
	1819 Main Street, STE 1000		1819 M	lain Street, STE	1000			
	Sarasota, Florida, 342360	_	Saraso	ta, Florida, 3423	86			
	September 1, 2021		L210003	390022				
3.	Date of filing/registration in Florida	4.	_	Document number	:r		•	
5. (a)	INCORP SERVICES INC							
. (4)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept-nfSu	nte:				
	Registered Office Address (MUST BE FLORIDA STREET)	_						
	17888 67th Court North				<u>:</u>	202		
	Loxahatchee FI	33470			MASSEG	2022 JUL 18	<u>. 194</u>	
					: 	8		
(b)	Enter name of NEW Registered Agent and/or NEW Registerer	Office :	ddresy:	_	ESSE!	P =		
	Pararcorp Incorporated			_	S FILE	2. ::		
	NEW Registered Office Address:				L.	7		
	155 Office Plaza Drive, 1st floor		· -	_				
	Taliahassee . FI	3230	1					
the cha agent was/w the art Mic	imited liability company is not organized under the la inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the hael Elliott Digitally signed by Michael Elliott Date: 2022 06:30 14:13:53 -06'00'	ws of the regability of the limited	ie State of F gistered offic company, it mited liabil	ce and the business is hereby confirme ity company or as company.	office of d that the otherwis	of the re ne chang e provid	gistered ge(s)	
-	by accept the appointment as registered agent and ag	ree to o	ct in this co	-			vith the	

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.

Jose Gomez, Assistant Secretary