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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: HPES, INC. Name of Corporation	· 		
DOCUMENT NUMBER: P11 0000 1 0 4 5	57		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter to the fol	owing:		
BRANDY RAY Name of Contact Perso PROFL MANAGEM Firm/Company			
381-3936 S. SEMORAN Address	BLVD		
ORLANDO / FLORIDA City/State and Zip Cod	32822		
FL. MANAGEMENT1 © A E-mail address: (to be used for future annu	OL. COM nal report notification)		
For further information concerning this matter, please call:			
BRANDY RAY Name of Contact Person at (3'	86, 626-4046		
Enclosed is a \$35.00 check made payable to the Department of St	, , ,		
, ,			
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: HPES, INC.
2. The principal office address: 381-3936 S. SEMORAN BLVD ORLANDO, FL 32822
3. The mailing address (if different):
4. Date of incorporation/qualification: 01/31/2011 Document number: P1100001045
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
INTERNATIONAL ADMINISTRATIVE SERVICES, INC.
230 CROWN DAK CENTRE DRIVE
LONGWOOD, FL 32750
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
PROFL MANAGEMENT INC
381-3936 S. SEMORAN BLVD PO. Box NOT acceptable
ORLANDO, FL 32822
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director ESMAIL, SCOTT (TITLE P/D) Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered Agent 2015 - 08 - 12 Date
If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)