

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000079197

Entity Name: ERPS LLC**Current Principal Place of Business:**15880 SUMMERLIN RD
SUITE #300 BOX #400
FORT MYERS, FL 33908**Current Mailing Address:**15880 SUMMERLIN RD
SUITE #300 BOX #400
FORT MYERS, FL 33908 US**FEI Number:** 80-0931459**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FAUGHT, KARI
15880 SUMMERLIN RD
SUITE #300 BOX #400
FORT MYERS, FL 33908 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** KARI FAUGHT

01/20/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM
Name	SAUNDERS, GLENN R
Address	15880 SUMMERLIN RD SUITE #300 BOX #400
City-State-Zip:	FORT MYERS FL 33908

Title	MGR
Name	SAUNDERS, GLENN
Address	15880 SUMMERLIN RD SUITE #300 BOX #400
City-State-Zip:	FORT MYERS FL 33908

Title	MBR
Name	SAUNDERS, RACHAELL
Address	15880 SUMMERLIN RD SUITE #300 BOX #400
City-State-Zip:	FORT MYERS FL 33908

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GLENN SAUNDERS

MGMR

01/20/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date