F12000004896

(Requestor's Name)			
(Address)			
(,			
(Add)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(2)			
(Business Entity Name)			
(Document Number)			
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COVER LETTER

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TO:	Amendment Section Division of Corporations	
	•	·
/:F:F> F	ECT: The G Group of Nevada Inc.	
Name Name	of Corporation	
	•	
DOCU	JMENT NUMBER: F12000004896	
The er	nclosed Statement of Change of Registered (Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning this n	natter to the following:
		C
Morgai	n Tracy	
Name	of Contact Person	
Corpor	ate Direct, Inc.	
Firm/C	Company	
2248 M	feridian Blvd., Ste H	
Addre:	ss	
	n, NV 89423	
City/S	tate and Zip Code	
	info@corporatedirect.com	
E-mai	l address: (to be used for future annual re	eport notification)
For fu	ther information concerning this matter, ple	ase call:
	ı Tracy	at (775)284-7166 Area Code & Daytime Telephone Number
Morgar	Name of Contact Person	

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation	7.0502, 607,1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Nevada registered agent, or both, in the State of Florida.	
	the corporation: The G Group of Nev		
		GRANDE AVE, LAS VEGAS. NV 89149	
3. The mailine :	address (if different):		
		Document number: F12000004896	
5. The name and	Letropt addrage of the overent review	and again and majoranal affice as file with the	
	James , Joshua Marcel	23	
	7901 4TH STREET NORTH SUITE 3	300	
	ST PETERSBURG, FL 33702	A 20 P	
6. The name and (if changed):	I street address of the new registered	d agent (if changed) and /or registered office (1) agent (1) ag	
	Registered Agents Inc		
	7901 4th St N STE 300		
P.O. Box NOT acceptable			
	St. Petersburg FL 33702		
The street address changed will	ess of its registered office and the s be identical.	street address of the business office of its registered agent,	
Such change wa authorized by th	is authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of directors or by an officer so en notified in writing of the change.	
Diana H	re of an officer or director	Diana Hicks, Director	
		Printed or typed name and title	
l hereby accept l further agree t of my duties, an document is hei corporation has	the appointment as registered age o comply with the provisions of all d I am familiar with and accept thing filed merely to reflect a change been notified in writing of this ch	nt and agree to act in this capacity. I statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange.	
David Repens		05-06-2024	
Sign	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
David Roberts			
Ту	ped or Printed Name		
	* * * FILING	G FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)