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Division of Corporations

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From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 : (307)200-2803 Phone : (855)330-1010 Fax Number

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LLC REGISTERED AGENT CHANGE GEMCAP DEVELOPMENT, LLC

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S. PRATHER

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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.

l. Na	me of the limited liability company: GEMCAI	P DEVELO	PMENT, LLC	
	418 N. Marshall	(b) 418 N. Marshall		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited lic (Note: MAY BE POST O	
	St 201	St 201		
	WINSTON-SALEM, NC 27101	WINST	WINSTON-SALEM, NC 27101	
	03/16/18	M1800	0002665	
3.	Date of filing/registration in Florida	4.	Document number	
• • •	CORPORATION SERVICE COMPANY			
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Sta	— nte:	
	1201 HAYS STREET			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	—	
				<u></u>
	TALLAHASSEE, FI	32301-2525		2021 JUN 14
<i>(</i> h)	Registered Agents Inc.			UH TU
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	_	ന് .
	7901 4th St N			AN ON
	NEW Registered Office Address:			31
	STE 300		_	
	St. Petersburg	L33702		
the cha agent was/w	imited liability company is not organized under the lange or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	nws of the State of I of the registered offi inbility company, it of the limited liabil	is hereby confirmed that tity company or as other	it the change(s)
2:4	us tark.	Riley Park		
-	sture of a member or authorized representative of a member		Printed or typed name of s	
provis the ob to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and completifications of my position as registered agent as provided relative to change in the registered office address, and in writing of this change.	e performance of n ed for in Chapter 6 hereby confirm the -	v uaires, anu r am jama 05. F.S. Or. if this docu	ment is being filed
<u> </u>	Bill Havre - Assista	nt Secretary		