## L160000 70515

(Requestor's Name)						
(Address)						
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PICK-UP	☐ WAIT	MAIL				
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## **COVER LETTER**

TO:	Registration Section Division of Corporations					
SUBJE	Global Capital Ventures, LLC	·		<u> </u>		
Name of Limited Liability Company						
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offic	e Change and fo	ec(s) are submitted for f	iling.		
Please	return all correspondence concerning this	matter to the fo	ollowing:			
Josep	oh H. Littky					
	Name of Person	· · · · · · · · · · · · · · · · · · ·	-			
	Fi (0		_			
	Firm/Company					
515 N	lorth Flagler Dr. Suite 1700		_			
	Address					
West	Palm Beach, FL 33401		_			
	City/State and Zip Code					
jlittky(	@gbltrust.com					
E	-mail address: (to be used for future annu	al report notific	ation)			
For fur	ther information concerning this matter, p	olease call:				
Josep	oh Littky	561 at (	472-0191			
	Name of Person		Area Code & Daytime	Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Divi P.O.	istration Section sion of Corporations Box 6327 ahassee, Florida 32314			
Enclosed is a check for the following amount:						
	■ \$25 Filing Fee	□ \$55	Filing Fee & Certified	Сору		

1,

## 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.	Name of the limited liability company: Global Capita	al Ven	tures, LLC		
2. (a	480 Hibiscus Street PH 30		(b) 480 Hibiscus Street PH 30		
(-	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(e) <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	West Palm Beach, FL 33401	_	West Pa	alm Beach, FL 33401	
	4/8/2016	_	 L160000	70515	
3.	Date of filing/registration in Florida	4.	<u> </u>	Document number	
5. (	Michael Cutler				
J. (	Registered Agent and Registered Office shown on the records of	the Flor	ida Dept. of Star	e:	
				_	
	Registered Office Address (MUST BE FLORIDA STREET) 480 Hibiscus St. PH 30	ADDRE	SS)	_	
	West Palm Beach	3340	1	_	
(b	Joseph H. Littky  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	address:	16	
	NEW Registered Office Address:			OEC HAM	
	515 North Flagler Drive #1700			SE PROPERTY OF THE PROPERTY OF	
	West Palm Beach , FL	3340	1	FLORII	
the clagent was/v	limited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- were authorized by an affirmative vote of the members of tricles of organization or the operating agreement of the	the reability of the l	gistered offic company, it i mited liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in inpany.	
Sign	nature of a member or authorized representative of a member		ichael I. Ct	Printed or typed name of signee	
I her	why accept the appointment as registered agent and age	ee to a	ct in this cap	again. I further garge to comply with the	
provi the o to me	sions of all statules relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I le ted in writing of this change.	perfor d for in hereby	mance of my Chapter 60: confirm that	duties, and I am Jamiliar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	

Signature of Registered Agent