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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARY JONES

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# P01000075396

Entity Name: GORDY'S EQUIPMENT OF BROWARD, INC.

Current Principal Place of Business:

1909 NW 16TH STREET POMPANO BEACH. FL 33069

Current Mailing Address:

1909 NW 16TH STREET POMPANO BEACH. FL 33069

FEI Number: 65-1126518

Name and Address of Current Registered Agent:

JONES, GARY 1909 NW 16 STREET POMPANO BEACH, FL 33069 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:

Officer

Title	PD	Title	DS
Name	JONES, GARY	Name	JONES, LINDA
Address	1909 NW 16 STREET	Address	1909 NW 16 STREET
City-State-Zip:	POMPANO BEACH FL 33069	City-State-Zip:	POMPANO BEACH FL 33069

	Electronic Signature of Registered Agent			
er/Director Detail :				
	PD	Title	DS	
	JONES, GARY	Name	JONES, LINDA	
s	1909 NW 16 STREET	Address	1909 NW 16 STREET	

Certificate of Status Desired: No

FILED Apr 30, 2019 Secretary of State 2817994404CC

Date

PRESIDENT

04/30/2019 Date