

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000083996

**Entity Name:** GCVFL LLC

**Current Principal Place of Business:**

703 N GADSDEN ST  
APT. 1  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

703 N GADSDEN ST  
APT. 1  
TALLAHASSEE, FL 32303 US

**FEI Number:** 46-2967994

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

JONES, TORRIS JR.  
703 N GADSDEN ST  
APT. 1  
TALLAHASSEE, FL 32303 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name JONES, TORRIS JR.  
Address 703 N GADSDEN ST  
APT. 1  
City-State-Zip: TALLAHASSEE FL 32303

Title MANAGER  
Name AKINWALE, TOLULOPE  
Address 703 N GADSDEN ST  
APT. 1  
City-State-Zip: TALLAHASSEE FL 32303

*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:** TORRIS JONES JR.

MR

04/28/2014

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date