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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 24, 2006

LATRICE TOWNS
GREENSTREET PARTNERS
2601 SOUTH BAYSHORE DRIVE SUITE 800
COCONUT GROVE, FL 33133

SUBJECT: GS/CAPITAL, LTD.
Ref. Number: A00000000920

We have received your document for GS/CAPITAL, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce
Document Specialist

Letter Number: 606A00020284

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DIVISION OF CORPORATIONS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GS/Capital, Ltd
(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A00000000920

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

LATRICE M TOWNS
(Contact Person)

Greenstreet Partners
(Firm/Company)

2601 SOUTH BAYSHORE DRIVE
(Address)
SUITE 800
MIAMI, FL 33133
(City, State and Zip Code)

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For further information concerning this matter, please call:

Latrice Towns at (305) 858-4225
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

INHS04 (01/06)

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. GS1 Capital Ltd
Name of Limited Partnership or Limited Liability Limited Partnership

2. 6/17/2000
Date of filing/registration in Florida

3. A000000000920
Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Sherry A. Stanley

Name

2601 S. Bayshore Dr. Suite 800

Address

Miami, FL 33133

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Victor Corral

Name

2601 S. Bayshore Dr. Suite 800

Florida street address (P.O. Box not acceptable)

Miami, FL

FL 33133

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature]
Signature of General Partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
Signature of Registered Agent

Filing Fee: \$35.00
Certified Copy (optional): \$52.50

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F.L.L.U.
SECRETARY OF STATE
DIVISION OF CORPORATIONS