Ø001/002

Division of Corporations **Electronic Filing Cover Sheet**

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(((H18000194004 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : GUNSTER, YOAKLEY & STEWART, P.A.

Account Number : 076117000420 : (561)650-0728 Phone : (561)671-2527 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Ø

REGISTERED AGENT CHANGE GELLER FAMILY HOLDINGS LLLP

Certificate of Status	0
Certified Copy	0
l'age Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

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JUN 03 2018

H180001940043

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTÈRED 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.

	Family Holdings LLLP				
Name of	Limited Partnership or Lin	nited Liabilit	y Limited Partnership	1	
2. 11/01/2010 Date of filing/registration in Florida		3	A10000000682 Florida documen	1682 ument number	
4. The name of the register Department of State:	ed agent and the registered	office address	ss as shown on the rec	ords of the Florida	
	Proskauer Ro				
	<u>Nar</u>	ne			
	2255 Glades Roa	d, Ste 421A	<u>. </u>		
	Addı	ress			
	Boca Raton, FL 3	3431			
	City, State	and Zip	 -		
5. The name and Florida st	reet address of the new regi	istered agent	and/or office:	22. 6	
	GY Corporat	<u>e Serviçes,</u>	Inc.		
	Nau	nc		7 T	
	600 Brickell Av	ve. Ste 3500)		
	Florida street address (P.			ي ا	
	3.77		ET 22121	$\mathbb{P}_{\mathcal{U}}$	
	Miami City, State	e and Zip	FL <u>33131</u>) W.	
6. Such change(s) is/are eff					
/s/ Peter Geller					
Signature of General Partne	ī				
I hereby accept the appoint comply with the provisions and I am familiar with an a	of all statut es relative to th	e proper and	l complete performant	further agree to ce of my duties,	
/s/ William Hyland					
Signature of Registered Age	ent				
Filing Fee: Certified Copy (option	\$35.00 nat): \$52.50				