

B1600000000017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

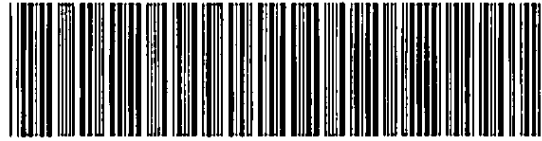
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300399446393

2022 DEC 29 PM 1:4

11200003

FILE REQUEST

December 20, 2022

**Florida Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**

<i>Type of Filing:</i>	Change of Registered Agent
<i>Subject:</i>	GLASSHAPE NORTH AMERICA, L.P.
<i>Form(s) Enclosed:</i>	Statement of Change of Registered Office or Registered Agent, or Both

Supporting Document(s):

Check(s) Enclosed: **Check # 1005 - \$25⁰⁰**

Return Via: **Email & US Mail**

Filing Method: **ASAP PLEASE**

As always, thank you.

Please return to:

**CAROL BERG
UNISEARCH, INC.
40 West 14th Street, Suite 2B
360-956-9500 Ext: 106
Fax: 360-956-9504
Carol.Berg@unisearch.com**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLASSHAPE NORTH AMERICA, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: B16000000017

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:

Carol Berg
Contact Person

Unisearch, Inc.
Firm/Company

40 West 14th Street, Suite 2B
Address

Helena, MT 59601
City, State and Zip Code

unisop@unisearch.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Berg at (360) 956-9500, ext. 106
Name of Contact Person Area Code and Daytime Telephone Number

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

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**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. GLASSHAPE NORTH AMERICA, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 01/22/2016 3. B16000000017
Date of filing/registration in Florida 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:

NRAJ SERVICES, INC.
Name
1200 SOUTH PINE ISLAND ROAD
Address
PLANTATION, FL 33324
City, State and Zip

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

UNISEARCH, INC.
Name
1980 MAIN STREET, SUITE 750-709
Florida street address (P.O. Box not acceptable)
SARASOTA FL 34236
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.
GNA DIRECTOR GROUP, L.L.C., General Partner

Signature of General Partner
By: Mark Forrest, Manager

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 of Registered Agent

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

2022 DEC 29 PM 1:4