

5/10/2021

M21000008126

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000187105 3)))



H210001871053ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

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

Email Address: _____

LLC REGISTERED AGENT CHANGE GMR SPRING HILL COUNTY LINE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

Please keep file date 5/13/2021

RECEIVED

2021 MAY 13 PM 2:17

SECRETARY OF STATE
DIVISION OF CORPORATIONSFILED
21 MAY 13 AM 8:03
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

TZ
5/14/21

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: GMR SPRING HILL COUNTY LINE, LLC

2. (a) _____ (b) _____

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

2 BETHESDA METRO CENTER, STE. 440

2 BETHESDA METRO CENTER, STE. 440

BETHESDA, MD 20814

BETHESDA, MD 20814

10/30/2020

F20000004854

3. Date of filing/registration in Florida

4.

Document number

5. (a) COGENCY GLOBAL INC

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

115 N. CALHOUN ST., STE. 4

TALLAHASSEE

FL 32301

C T Corporation System

(b)

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1200 South Pine Island Road

Plantation

FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Robert Kiernan

Signature of a member or authorized representative of a member

Robert Kiernan

Printed or typed name of signee

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Mark Holloway

By: Mark Holloway Asst. Secretary

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
21 MAY 13 AM 8:04
TALLAHASSEE, FLORIDA