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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (813)436-5206

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

Email	Address:	<u> </u>	
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REGISTERED AGENT CHANGE GSMC 1 INCORPORATED

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chai	ige is submitted for a corporation of	0502, 607,1508, or 617,1508, Florida State ganized under the laws of the State of <mark>Dela</mark> gistered agent, or both, in the State of Flori	918W	·	
i. The name of (ne corposition: GSMC 1, INCORPOR	ATED			
2. The principal	office address:				
3. The mailing a	ldress (if different):				
4. Date of incorp	oration/qualification: 07/13/23	Document number: F2300000408	36 ———		
5. The name and		ed agent and registered office on file with t			
	ZENBUSINESS INC.				
	336 EAST COLLEGE AVE SUITE 301		:n	26	
	TALLAHASSEE, FL 32301		W.S.	2023 NOV 15	
6. The name and (if changed):	street address of the new registered	agent (if changed) and for registered office	10mm 10mm 10mm 10mm 10mm 10mm 10mm 10mm	V 15 PM	E
	Registered Agents Inc				
	7901 4th St N STE 300		Li j	: 03	
), Box. NOF acceptable		•	
	St. Petersburg FL 33702				
as changed will	be identical.	reet address of the business office of its re		i agent.	
Such change we authorized by the	s authorized by resolution duly add e board, or the corporation has bee	opted by its board of directors or by an off a notified in writing of the change.	icer so		
17 - Louis de la Signation de	//- t// / / / //- t// / / / efit an officer of director	Robin Jones Printed or typed name and title		,	
L hereby accept I further agree t of my duties, an dociment is bei	the appointment as registered agen o comply with the provisions of all	nt and agree to act in this capacity, statutes relative to the proper and comple obligation of my position as registered ag in the registered office address, I hereby c	ate perfo cent. O	ormance r. if this	
DavidX	<i>doerts</i>	11/15/2023			
4	iatore of Registered Agent	Date			
If signing on be	nall of an entity:				
David Roberts					
- 1	ped or Printed Name				