## L00 0000009504

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
. (C	ity/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(B	usiness Entity Name)			
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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2019 NOV 12 PH 1: 41

DEC 0 8 5018 A 6111 15\_3

## **COVER LETTER**

TO:	Registration Section Division of Corporations				
SUBJI	Gemstone Realty, L.L.C.				
Name of Limited Liability Company					
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Off	ice Change and f	cc(s) are submitted for filing.		
Please	return all correspondence concerning th	is matter to the fo	ollowing:		
Ray (	C. Guenther				
7	Name of Person		_		
Gem	stone Realty, L.L.C.				
	Firm/Company		_		
809 F	Patrick Street				
<del></del>	Address		_		
Kissir	mmee, FL 34741				
	City/State and Zip Code		_		
ray@	gemstonehomes.com				
Ē	E-mail address: (to be used for future ann	ual report notific	cation)		
For fu	rther information concerning this matter.	please call:			
Ray (	C. Guenther	407 at (	397-1128		
	Name of Person		Area Code & Daytime Telephone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Reg Divi P.O	ILING ADDRESS: istration Section ision of Corporations . Box 6327 ahassee, Florida 32314		
	Enclosed is a check for the following	amount:			
	<b>☑</b> \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy		

## 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.

. (a)		(b)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	809 Patrick Street	80	809 Patrick Street		
	Kissimmee, FL 34741	Ki	ssimmee, FL 34741		
	08/03/2000	LOC	000009504		
	Date of filing/registration in Florida	4.	Document number		
. (a)	Ivan Mesq Leftowitz				
. (a)	Registered Agent and Registered Office shown on the records o	of the Florida Dep	ot. of State:		
	Registered Office Address <u>(MUST BE FLORIDA STREET</u> 430 North Mills Avenue	( ADDRESS)	<del></del>		
	Orlando	32803			
(b)	Ray C. Guenther		2019 N		
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	ed Office address	PILED 2019 NOV 12 PH 5: 5 ALL Anim SCREET CO. ALL		
			# in		
	NEW Registered Office Address:		a D		
	809 Patrick Street				
	Kissimmee, F	L34741			
ie cha gent v ras/wo	imited liability company is not organized under the lange or changes are made, the Florida street address ovill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the registere liability compa of the limited	ed office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in		
	KN GW	Ray C.	Guenther		
	ture of a member or authorized representative of a member		Printed or typed name of signee		