L03000020537

(Re	questor's Nam	ne)		
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Ph	one #)		
(=	.,			
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity N	Name)		
•	•	•		
(Document Number)				
(50	Cument Numb	er)		
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
		1 10 A		
Ch.	wr5 2	ORA		
<u> </u>		· · · · · · · · · · · · · · · · · · ·		

Office Use Only



900252109579

09/30/13--01015--007 **110.00

SEP 30 PM 4: 0:

T. Burch OCT 1 2013.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G FAM Investments, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jorge H. Garcia

Name of Person

G FAM Investments, LLC

Firm/Company

2365 Vista Parkway, Suite 15

Address

West Palm Beach, FL 33411

City/State and Zip Code

Jorge Garcia <1240jgarcia@gmail.com>

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jorge Garcia

_{a.} 561

866-6179

Name of Person

Area Code & Daytime Telephone Numbe

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

□ \$25 Fiting 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 608.416 or 608.508, 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. 1	۷aı	me of the limited liability company: GFAM Investments, LLC	· .	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	2365 Vista Parkway, Suite 15 West Palm Beach, FL 33411	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2365 Vista Parkway, Suite 15 West Palm Beach, FL 33411	13 NEC S
0		. 10.0010	. 000000003	新 SEP 下
		te of filing/registration in Florida	L03000020537 I. Document number	30 SSEE
5.	(a)	Registered Agent and Registered Office shown on the	ne records of the Florida	Dogt of State:
		Registered Agent:	Michelle A. Caldwell	ATE O
		Registered Office Address:	7342 NW 58th Way	~ ~
			Parkland, Fl. 33067	
((b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	David B. Israel, Esq.	ress:
NEW Registered Office Address:			The Law Offices of David Ben Israel,	P.A.
		(MUST BE FLORIDA STREET ADDRESS)	12555 Orange Drive, Suite 4023 Davie	FL 33330
con and liab the the	firi the ilit me op	imited liability company is not organized under the lamed that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the thinted liability company or as otherwise rating agreement of the limited liability company.	orida street address of the	e registered office
		Garcis or typed name of signee	-	
I he con and Cha add	ere tra	by accept the appointment as registered agent and as with the provisions of all statules relative to the proving familiar with and accept the obligations of my poset 608, F.S. Wriftthis document is being filed to men the province of the company o	ree to act in this capacit per and complete perfori ition as registered agent ely reflect a change in th has been notified in writ	y. I further agree to mance of my duties, as provided for in e registered office ing of this change.

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