**Division of Corporations** Electronic Filing Cover Sheet

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(((H15000210681 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)205-8842 Phone

: (850)878-5368 Fax Number

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## LLC REGISTERED AGENT CHANGE GF INVESTMENT SERVICES, LLC

Certificate of Status	0
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Page Count	03
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Corporate Filing Menu

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## COYER LETTER

		***			
	nion Section n of Corporations				
SUBJECT: G	F INVESTMENT SERVICES	S, LLC			
Name of Limited Liability Company					
Dear Sir or Mad	lam:				
The enclosed R	egistered Agent/Registered Office	e Change and fee(s) are submitted for filing.			
Please return al	correspondence concerning this	matter to the following:			
JOHN MOR	AN, ESQUIRE	•			
· · · · · · · · · · · · · · · · · · ·	Name of Person	<del></del>			
DUNLAP & I	MORAN, P.A.				
	Firm/Company				
P.O. BOX 39	948				
	Address				
SARASOTA	, FL 34230-3948				
	City/State and Zip Code	<del></del>			
	AFF@DUNLAPMORAN.CC				
E-mail ad	dress: (to be used for future annu	ial report notification)			
For further info	ormation concerning this matter, p	please call:			
SONNI DEL	LENBACH	941 366-0115			
<u> </u>	Name of Person	Area Code & Daytime Telephone Number			
STRE	et/courier address:	MAILING ADDRESS:			
	ration Section	Registration Section			
Divisio	on of Corporations	Division of Corporations			
	n Building	P.O. Box 6327			
	Executive Center Circle	Tallahassee, Florida 32314			
Tallah	assee, Florida 32301				
Enclos	sed is a check for the following	amouat:			
<b>□ \$</b> 25	Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18 (2/14)					

## 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 understanced limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Nam	e of the limited liability company: GF INVESTM	ENT SE	RVICES	LLC	
2. (a) 5	01 NORTH CATTLEMEN ROAD	(b) 501 NORTH CATTLEMEN ROAD			
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<b></b>		failing address of limited liability company:  (Note: MAY RE POST OFFICE ROX)	
	SUITE 106		SUITE 1		
•	SARASOTA, FL 34232	_	SARAS	OTA, FL 34232	
(	07/13/2004		L040000	51638	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a) _	GEOFFREY A. FRAZIER				
Į.	logistered Agent and Registered Office abown on the records of a 2080 RINGLING BLVD.	be Florida	Dept. of Stat	- b:	
i	Registered Office Address (MUST BE FLORIDA STREET A	IDDRESS	<u>l</u>	. 20	
_	FIRST FLOOR			7015 S	
	SARASOTA .FL	34237		SE SE T	
(b)	JOHN A. MORAN, ESQUIRE			SEP -1 P	
ì	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:		
	22 S. LINKS AVE.			AFIO: 4	
•	NEW Registered Office Address:			ār 🗜	
	SUITE 300			· -	
	SARASOTA	34230		_	
the char agent w was/wer the artic	mited liability company is not organized under the lange or changes are made, the Florida street address of illustration of the desired limited in relaution for the affirmative vote of the members of organization or the operating agreement of the	f the regi lability c of the lir limited	stered offic ompany, it nited liabili llability co	te and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in impany.  'A. FRAZIER, MEMBER	
- 1	he of a member of authorized representative of a member			Printed or typed name of signee	
	y accept the appointment as registered agent and agents of all statutes relative to the proper and complete gotions of my position as registered agent as provide ity reflects a change in the registered office address, I in writing of this change.	ree to ac e perforn ed for in hereby	it in this ca nance of m Chapter of confirm tha	pacity. I further agree to comply with the vautes, and I am familiar with and accept 55, F.S. Or, if this document is being filed the limited liability company has been	
7	Division of Corporations P.O.	Box 632	7• Tallsh	assee. FL 32314	

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

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