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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer	

A. LUNT

JUN 23 2008

EXAMINER

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06/20/08--01034--001 **25.00

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJECT: GULF COAST REALTY AND INVESTMENT GROUP, LLC (Name of Limited Liability Company)				
Dear	Sir or Madam:			
The e	nclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted f	for filing.	
Please	e return all correspondence concerning the	his matter to the following:	1299 JUN 20 SECRETARY TALLAHASSE	
BRIAN	N STRZYZ (Name of Person)	, , , , , , , , , , , , , , , , , , , 	20 P 3 44. ARY OF STATE (SSEE, FLORIDA	
GULF COAST REALTY AND INVESTMENT GROUP, LLC (Firm/Company)				
<u>1299</u> :	5 S. CLEVELAND AVE.SUITE 6 (Address)			
FT. N	MYERS FL 33907 US (City/State and Zip Code)			
For fi	urther information concerning this matter	r, please call:		
BRIA		at (239) 218-8124		
	(Name of Person)	(Area Code & Daytime Telephon	ne Number)	
	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	g amount:		
	☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified	Сору	

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. Name of the limited liability company: <u>GULF COAS</u>	T REALTY AND INVESTMENT GROUP, LLC		
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	y: 12995 S. CLEVELAND AVE.SUITE 6 FT. MYERS FL 33907 US		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	12995 S. CLEVELAND AVE.SUITE 6 FT. MYERS FL 33907 US		
11/08/2004 3. Date of filing/registration in Florida	<u>L0400080920</u> 4. Document number		
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:		
Registered Agent:	CORPORATION SERVICE COMPANY		
Registered Office Address:	1201 HAYS STREET TALLAHASSEE FL 3230 FUS		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>			
NEW Registered Agent:	BRIAN STRZYZ TO		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	5627 DEAUVILLE COURT ES CAPE CORAL, FL 33904 US FL		
If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. (Signature of a number or authorized representative of a member)	et address of the registered office and the business case of a Florida limited liability company, it is		
BRIAN STRZYZ	_		
(Printed or typed name of signee) I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the p am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notificated.	agree to act in this capacity. I further agree to roper and complete performance of my duties, and I n as registered agent as provided for in Chapter 608, n change in the registered office address, I hereby ed in writing of this change.		
(Signature of Registered Agent)	v 6227 Tallahassaa FI 32214		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00			