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(Requestor's Name)								
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(Address)								
(City/State/Zip/Phone #)								
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
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SECRETARY OF STATE
TALLABASSEE FLORIDA

TALLABASSEE FLORIDA

FEB 1 0 2015 T. CARTER

COVER LETTER

	egistration Section Division of Corporations				
SUBJEC	Garfold LLC				
	iability Company				
Dear Sir o	or Madam:				
The enclo	osed Registered Agent/Registered Office	ce Change and	fee(s) are submitted for filing.		
Please ret	turn all correspondence concerning thi	s matter to the	following:		
Paul F	Confold				
	Name of Person				
Garfold	LLC		_		
	Firm/Company				
27105 E	Edenbridge Ct				
	Address				
Bonita (Springs FL 34135				
	City/State and Zip Code				
pgarfold	d@comcast.net				
E-m	nail address: (to be used for future ann	ual report notif	fication)		
For furth	er information concerning this matter,	please call:			
Paul Ga	arfold	239	495-9213		
	Name of Person		Area Code & Daytime Telephone Number		
s	STREET/COURIER ADDRESS:	М	AILING ADDRESS:		
	Registration Section		gistration Section		
	5		vision of Corporations		
	Clifton Building		O. Box 6327		
	661 Executive Center Circle Fallahassee, Florida 32301	I a	ıllahassee, Florida 32314		
Enclosed is a check for the following amount:					
	2 \$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 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.	Na	me of the limited liability company: Garfold LLC					<u> </u>	
2.	(a)			(b)				
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		. ,	N	Mailing address of limited l	liability c <i>OFFICE</i>	ompany: BOX)
		6100 Estero Blvd			27105 E	denbridge Ct		
		Fort Myers Beach FL 33931			Bonita S	prings FL 34135		
		12/31/2004		ı	_0400009	92919		
3.		Date of filing/registration in Florida	4.	-	,	Document number		
5	(a)	Paul F Garfold						
J.	(4)	Registered Agent and Registered Office shown on the records of	the Flori	ida	Dept. of State	- ::		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					-	亦	IAT SI
		6100 Estero Blvd					EB3	CRI
		Fort Myers Beach , FI	3393	1		•	B -5	
		,,				-	PH	
	(b)				-	မှာ	ST ST	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	<u>add</u>	ress:		38	ATE/
		NEW Registered Office Address:				-		
		27105 Edenbridge Ct				•		
		Bonita Springs , FI	3413	5				
the age wa	cha ent v s/we	mited liability company is not organized under the la nge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited litre authorized by an affirmative vote of the members of organization or the operating agreement of the	ws of the repability of the limited	ne gis co imi d li	tered office mpany, it is ted liability	e and the business offi s hereby confirmed th y company or as other apany.	ice of that the	ne registered hange(s)
<u>S</u>	ignat	due f Avld— ure of a member of authorized representative of a member		au	- Gano	Printed or typed name of	signee	
I h pro the to not	nerel ovisi obl merc tified	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I writing of this change.	ree to a perfor d for in hereby	nct ma n C	in this cape ince of my c hapter 605 nfirm that	acity. I further agree	to com	ply with the 1 and accept being filed has been
.,,15	,u	()						

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

INHS18 (2/14)