

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

**This is A
Re-fax; please
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LLC REGISTERED AGENT CHANGE GGMH KORT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED
12 JAN 10 PM 4:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Corporate Filing Menu

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JAN 11 2012

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GGMH KORT, 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:

Gerald G. Kort

Name of Person

GGMH KORT, LLC

Firm/Company

20920 ANDIRON PLACE

Address

ESTERO FL 33928

City/State and Zip Code

ggmhkort@hotmail.com

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

For further information concerning this matter, please call:

Gerald G. Kort

Name of Person

at (239) 498-5313

Area Code & Daytime Telephone 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 amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

INHS18 (5/08)

FL015 - 11/16/2010 CT System Online

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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: GGMH KORT, LLC

2. (a) Principal office address of limited liability company:

20920 ANDIRON PLACE

(Note: MUST BE STREET ADDRESS)

ESTERO FL 33928

(b) Mailing address of limited liability company:

20920 ANDIRON PLACE

(Note: MAY BE POST OFFICE BOX)

ESTERO FL 33928

01/12/2005

3. Date of filing/registration in Florida

L05000003936

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

NAPLES-LAWDOCK, INC.

Registered Office Address:

1395 PANTHER LANE, SUITE 300

NAPLES FL 34109

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

(MUST BE FLORIDA STREET ADDRESS)

Plantation

FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Gerald G. Kort
Signature of a member or authorized representative of a member

Gerald G. Kort

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

C T Corporation System

By: Rebecca Barch
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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