

2050000106065

2006 MAR -6 P 2:35

(Requestor's Name)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



200062918742

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(City/State/Zip/Phone #)

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

FILED

2006 MAR -6 P 2:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

January 18, 2006

JOSEPH PHILOPOSE  
2690 DREW STREET UNIT 301  
CLEARWATER, FL 33759-3127

SUBJECT: GRYPHON GLOBAL SOLUTIONS LLC  
Ref. Number: L05000106065

We have received your document for GRYPHON GLOBAL SOLUTIONS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Document Specialist

Letter Number: 806A00003437

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GRYPHON GLOBAL SOLUTIONS LLC  
(Name of Limited Liability Company)

FILED

2006 MAR -6 P 2:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

JOSEPH PHILIPSE

(Name of Person)

GRYPHON GLOBAL SOLUTIONS LLC

(Firm/Company)

8884 LAUREL DR

(Address)

PINELLAS PARK FL 33782

(City/State and Zip Code)

For further information concerning this matter, please call:

JOSEPH PHILIPSE

(Name of Person)

at ( 727 )

424-9842

(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

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. The name of the limited liability company is: GRYPHON GLOBAL SOLUTIONS
2. The mailing address of the limited liability company is: 2690 DREW STREET  
UNIT # 301, CLEARWATER FL 33759
3. Date of filing/registration in Florida: 10-31-2005
4. Document number: L05000106065

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

JOSEPH PHILIPPOSE  
Name

~~8884 LAUREL DR~~  
Address

PINELLAS PARK FL 33782  
City, State and Zip

21227 U.S. 19 # 119J  
FL 33761

6. The name and address of the new registered agent and/or office:

JOSEPH PHILIPPOSE  
Name

8884 LAUREL DR

Florida street address (P.O. Box NOT acceptable)

PINELLAS PARK FL 33782  
City, State and Zip

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.

Joseph Philippose  
(Signature of member or authorized representative of a member)

JOSEPH PHILIPPOSE

(Printed or typed name of signee)

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.

Joseph Philippose  
(Signature of Registered Agent)

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

FILING FEE: \$25.00