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## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 20, 2007

DAVID GAUL 743 STONECREST DR. SARASOTA, FL 34232

SUBJECT: G & S PAINTING SERVICES, LLC

Ref. Number: L06000058740

SECRETARY OF STATE OF ALLAHASSEE, FIORIOA

We have received your document for G & S PAINTING SERVICES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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: 907A00019317

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: GFS PAINTING Serviss LUC (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:
DAVID GAUL (Name of Person)
GES PAINTING SERVICES (Firm/Company)  AND A
743 STONECREST DR. LEGAL ASSER SER SER
THE STONE CREST DR.  ALLCARETARY OF STATE ARRY OF STATE ARRY OF STATE OF ST
For further information concerning this matter, please call:
DAULD GRUL at (941) 320-9486  (Name of Person) (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:
\$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: GFS PAINTING SERVICES	
2. The mailing address of the limited liability company is: 743 STONECREST DI	2
SARASOTA, FC 34232	_
03/12/07	
3. Date of filing/registration in Florida 4. Document number	-
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:	
THE COMPANY CORPORATION	
P.o. Box 13397 Address	
PHILADELPHIA PA 19101-3397 City, State and Zip	
6. The name and address of the new registered agent and/or office:	
Name  743 Stone CREST DRIVE  Florida street address (P.O. Box NOT acceptable)  SALASOTA FL 34232	
SARASOTA FL 34232 FO TO 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.  (Signature of a member or authorized representative of a member)	
(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.	•

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

(Signature of Registered Agent)