L070000004681

(Re	questor's Name)	
(Address)		
(Address)		
(Cit	y/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
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Certified Copies	_ Certificates	s or Status
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SECRETARY OF STATE

FEC - 3 2013

T. BAMPION

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: GL International I	_LC (L0700004681)		
Name of L	imited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.		
Please return all correspondence concerning to	his matter to the following:		
Mark Star			
Name of Person			
Firm/Company			
12555 Biscayne Blvd #882			
Address			
North Miami, FI 33181			
City/State and Zip Code			
starinfo55@gmail.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Mark Star	305 213-0666		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS:	MAILING ADDRESS:		
Registration Section	Registration Section		
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327		
2661 Executive Center Circle	Tallahassee, Florida 32314		
Tallahassee, Florida 32301	Tananassoo, Florida 32317		
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.

agent, or both, in the state of riorida.			
1. Name of the limited liability company: GL international, LL	<u>c</u>		
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 16850-112 Collins Ave #176 Sunny Isles, Fl 33160		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	16850-112 Collins Ave #176 Suncy Isles, Fl 33160		
1/12/07	107000004681		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:		
Registered Agent:	Lubanzadio, Galina		
Registered Office Address:	16850-112 Collins Ave#176 Sunny Isles. Fi 33160		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:		
NEW Registered Agent;	Mark Star		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	12555 Biscayne Blvd #882 North MiamiFI_33181		
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	_		
Galina Lubanzadio Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company Signature of Registered steps.	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.		
Division of Corporations, P.O. Box 63 FILING FEE: \$,			
INHS18 (05/08)	DEC :		