## 10800001428

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(Document Number)						
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SECRETARY OF STATE

SECRETARY OF STATE

K. SALY JUN - 9 2017

## **COVER LETTER**

TO:

INHS18 (2/14)

Registration Section

Divi	sion of Corporations					
SUBJECT:	Growth Communications Group, LLC					
SODULET.	Name of Limited Liability Company					
Dear Sir or N	Aadam:					
The enclosed	Registered Agent/Registered Office Ch	nange and fec(s) are submitted for filing.				
Please return	all correspondence concerning this mat	ter to the following:				
Rick Alvare	ez					
	Name of Person	<del></del>				
Older, Lun	dy and Alvarez					
	Firm/Company	<del></del>				
1000 West	Cass Street					
	Address	<del></del>				
Tampa FL	33606					
	City/State and Zip Code					
cvanvalkir	burg@growthcg.com					
E-mail	address: (to be used for future annual re	port notification)				
For further in	formation concerning this matter, pleas	e call:				
Katherine E	Bernard at (	813 283-1930				
	Name of Person	Area Code & Daytime Telephone Number				
Regis Divis Clifto 2661	EET/COURIER ADDRESS: stration Section ion of Corporations on Building Executive Center Circle hassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:						
<b>☑</b> \$2	5 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 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	ame of the limited liability company: Growth Comn	nunica	itio	ns Grou	лр, LLC
2.	(a)	5510 N Hesperides Street	C	b) _	same	
۲.	()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ `	-,.		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Tampa, FL 33614	_	-		
		1/4/2008	~ <del>-</del>	L	080000	01428
3.		Date of filing/registration in Florida	4.			Document number
5.	(a)	Rick Alvarez				
J. (č	(4)	Registered Agent and Registered Office shown on the records of the 3014 West Palmira Ave, Suite 202	he Florid	la D	ept. of Stat	FALSE 12
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			MIJUN-8 PH 3:49 SECRETARY OF STATE FALLAHASSEE, FLORID	
(b)		Tampa , FL	33629			1-8 PH 3: 19 HASSEE, FLORIDA
	(b)	Rick Alvarez				STAT STATE
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			DE S	
		1000 West Cass Street				
		NEW Registered Office Address:				-
		Tampa FI.	33606	 S		-
the age	cha ent w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the the regi bility c f the lin limited	e Siste	ered offict pany, it i ed liabilit bility con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
			Pe	te	Nelson	
	_	ure of a member or authorized representative of a member			.7 4	Printed or typed name of signee
pro the to 1	visio obli nere	y accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	nartarn	nnn	CO OT MIL	auties, ana i am tamiliar Willi ana acceni
Sig	natur	e of Registered Agent				