## 1090000 30248

(R	equestor's Name)				
(Address)					
(Address)					
(C	ity/State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(B	usiness Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to	o Filing Officer:				





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MAY 21 2019 S. YOUNG



## **COVER LETTER**

TO:	Registration Section Division of Corporations		<b>₹</b>	<b>a</b>			
SUBJ	GKM Consulting LLC						
2,020	Name of Limited Liability Company						
Dear S	Sir or Madam:						
The e	nclosed Registered Agent/Registered Off	ice Change and	d fee(s) are sub	mitted for filing.			
Please	e return all correspondence concerning th	is matter to the	following:				
Greg	Capello						
	Name of Person		~~~ <del>~</del>				
GKM	Consulting LLC						
	Firm/Company						
5703	Yeats Manor Dr, Unit 301						
	Address						
Tam	pa, Florida 33616						
	City/State and Zip Code						
gcap	ello123@gmail.com						
	E-mail address: (to be used for future ann	iual report noti	fication)				
For fu	rther information concerning this matter.	please call:					
Greg	Capello	813 at (	335-664	8			
	Name of Person	\ <del></del>	Area Code &	& Daytime Telep	hone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Re Di P.	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			
INHSI	8 (2/14)						

## 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	me of the limited liability company: GKM Consulting	ng LLC	<u> </u>	
2	(a)	5703 Yeats Manor Drive, Unit 301	(b) 5703 Yeats Manor Drive, Unit 301		
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Tampa, Fl 33616	_ (		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  npa, Fl 33616
			_		lipa, Fi 33010
		03/27/2009		L0900	000030248
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Greg Capello			
	1-7	Registered Agent and Registered Office shown on the records of the 8522 Bassett Ct, Riverview FI 33578	of State:		
		Registered Office Address (MUST BE FLORIDA STREET A.			
		.FL			
		,,,			
	(b)		<u> </u>		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	· - <del></del>		
		NEW Registered Office Address:			
		5703 Yeats Manor Drive, Unit 301			
		Tampa	33616		
		, FL_			
the ag wa	ent v ent v is/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cler of organization or the operating agreement of the l	the regi bility co the lin	stered o Impany nited lia	office and the business office of the registered by, it is hereby confirmed that the change(s) by it is hereby confirmed that the change(s)
		- white	Gre	g Cap	apello
	Signa	fure of a member or authorized representative of a member			Printed or typed name of signee
pr the to	bvisi 2 obl mere	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely poffect a change in the regimered office address, I had in writing of this change.	re to ac perform for in ( ereby c	in this ance of Chapter onfirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been
Si	gnard	re of Registered Agent			