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Special Instructions to Filing Officer:						
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•	ૐ	***	COVE	R LETTER	#. *E	•		*
	egistration Section , ivision of Corporations					•		
SUBJEC'	GSA Processors Co., '	LLC	2					
		Name o	f Limite	d Liability C	ompany			
Dear Sir o	or Madam:							
The enclo	sed Registered Agent/Registered	Office (Change :	and fee(s) ar	e submitt	ed for	filing.	
Please ret	urn all correspondence concernin	g this m	atter to	the following	g:			
David L	evenreich							
	Name of Person			<u> </u>				
•	Firm/Company		•					
406 Sou	ith Prospect Ave.							
	Address							
Clearwa	iter, FL 33756							
	City/State and Zip Co	de						
dcleven	reich@yahoo.com							
E-m	ail address: (to be used for future	annual	report n	otification)				
For furthe	er information concerning this ma	tter, ple	ase call:					
David Lo	evenreich		727	, 44 1	-8485			
	Name of Person	·	ıı (<u> </u>	Area C	Code & Da	aytime	Telephon	e Number
R D C 2	TREET/COURIER ADDRESS egistration Section vivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	:		MAILING Registration Division of P.O. Box 63 Tallahassee	Section Corporat 327	ions		
Enclosed is a check for the following amount:								
V	\$25 Filing Fee			\$55 Filing	Fee & Ce	ertified	Сору	

INHS18 (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. N	Name of the limited liability company: GSA Processo	ors Co	., LLC	
2. (a)	334 East Lake Rd., #223	(_{b)} Same	
(w.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Palm Harbor, FL 34685	_		
	7/31/2009		L090000	73766
3.	Date of filing/registration in Florida	4.		Document number
5. (a	Vince Urso			_
,	Registered Agent and Registered Office shown on the records of t	he Florio	la Dept. of Sta	te:
	334 East Lake Rd.			_
	Registered Office Address (MUST BE FLORIDA STREET A	I <i>DDRES</i>	<u>(S)</u>	
	Palm Harbor, FL_	34685	5	_
	、David C. Levenreich			_
(b	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:	_
	406 South Prospect Ave.			
	NEW Registered Office Address:			
				_
	Clearwater , FL	33756	5 	-
the cl agent was/v the ar	limited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of tricles of organization or the operating agreement of the	the reg ability of the li	istered office company, it mited liabili liability con	ee and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
- 1117	nature of almember or authorized representative of a member			
I her provide to me noutfi	eby accept the appointment as registered agent and agr signs of all statutes relative to the proper and complete oligations of my position as registered agent as provided rely reflect a change in the registered office address. I r ed in writing of this change	ee to a perfori d for in hereby	ct in this cap nance of my Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
A AA	Division of Corporations • P.O. E			ssee, FL 32314
	FILING FI	ee: 32	5.00	

INHS18 (2/14)