L 69000 113496

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Entity Name)				
(Document Number)				
(Boodinion: Mainbol)				
Certified Copies Certificates of Status				
<u> </u>				
Special Instructions to Filing Officer:				





000252566780

10/17/13--01008--009 **25.00

28日 OCT 16 PM 1: 42

OCT 17 2013 T CLINE

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: THE GARRITY DEVELOPMENT GROUP, LLC

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:

John M Garrity II

Name of Person

The Garrity Development Group, LLC

Firm/Company

3225 S. MacDill Ave, Suite 129-249

Address

Tampa, FL 33629

City/State and Zip Code

jgarrityii@thegdg.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John M Garrity

__.813

252-4878

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:

\$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.

1. Nai	me of the limited liability company: The Garrity Developm	ent Group	<u>.</u>	
2. (a)	Principal office address of limited liability compan	/: 196 Ceylon Ave.		
(Note: MUST BE STREET ADDRESS)		Tampa, FL 33606		
(b)	Mailing address of limited liability company:	3225 S. MacDill Ave		
(0)	(Note: MAY BE POST OFFICE BOX)	Suite 129-249		
		Tampa, FL 33629		
Novembe	r 25, 2009	L09000113496		
3. Dat	e of filing/registration in Florida	4. Document number		
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Deptitof State:			
	Registered Agent:	John M Garrity		
	Registered Office Address:	7 Windward Island	70 क	
		Clearwater, FL 33767	-0.11 -2 ;	
			## -	
(h)	Enter name of NEW Registered Agent and/or NE	W Registered Office add	関語・2	
(0)		W Registered Office add	1633.	
	NEW Registered Agent:	John M Garrity II		
	NEW Registered Office Address:	196 Ceylon Ave		
	(MUST BE FLORIDA STREET ADDRESS)	Tampa, FL 33606	,FL	
10.1		1 01 01 001 11		
confirmand the liability the me	imited liability company is not organized under the ned that after the change or changes are made, the Fe business office of the registered agent will be idenly company, it is hereby confirmed that the change(smbers of the limited liability company or as otherwestating agreement of the limited liability company.	llorida street address of the	registered office	
Signature	a member or authorized representative of a member	_		
John M Ga	arrity II			
	or typed name of signee			
and I a	by accept the appointment as registered agent and a with the prodisions of all statutes relative to the profisions of all statutes relative to the profit meant and accept the obligations of my point to the confirmities of the	roper and complete perform osition as registered agent	nance of my duties, as provided for in	
Signatur	e of Registered Agent			
//	Division of Corporations, P.O. Box 63	327, Tallahassee, FL 323	14	

FILING FEE: \$25.00