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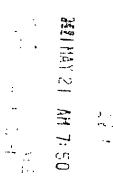
(Requestor's Name)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
, ,						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special instructions to raining Officer.						





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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 19, 2021

Order#: 819975/015

Re: GPHW, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{XX} Check in the amount of \$25.

Please take the following action:

XX ___ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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	ume of the limited liability company: GPHW, LLC			
2	(a)	7807 Baymeadows Road East	(1	b)	-
Σ.	(11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 205			
		Jacksonville, FL 32256			
		03/25/2010		L10000032	2599
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Feldman & Mahoney, P.A.			12m2 대한 는다.
	(4)	Registered Agent and Registered Office shown on the records of	Tthe Florida	a Dept. of State	
		2240 Belleair Road, Suite 210			2
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-
		Clearwater	. 33764		- -1
		, FI	l		<u> </u>
	(b)				
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	dress:	-
		Corporation Service Company	·		_
		NEW Registered Office Address:			
		1201 Hays Street			_
				-	-
		Tallahassee . FI	32301 L		
cha age was the /s/	inge ent w s/we artic / Ed	mited liability company is not organized under the lator changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited litre authorized by an affirmative vote of the members called of organization or the operating agreement of the ward E. Burr	e registere ability co of the lim c limited l	ed office and impany, it is lited liability	If the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in pany.
Signature of a member or authorized representative of a member					Printed or typed name of signee
pro the to t	visio obli nere		performe d for in C hereby co Corporati	mce of my a Thapter 605, onfirm that to on Service	luties, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been Company
Sig	natur	e of Registered Agent	Ami M. C	Jasper, Ass	st. Vice President