

L1000000699155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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11 MAY 16 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GT MARKETING 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:

TIMOTHY DEVALLE
Name of Person

GT MARKETING LLC
Firm/Company

800 TRAFFERY ST 404
Address

BOCA RATON FL 33487
City/State and Zip Code

tim@grainTRACKER.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TIMOTHY DEVALLE at (561) 445 1772
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 3, 2011

TIMOTHY DEVALLE
800 JEFFERY STREET, 404
BOCA RATON, FL 33487

SUBJECT: G T MARKETING LLC
Ref. Number: L10000069955

We have received your document for G T MARKETING LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 211A00010722

5/14/2010

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. Name of the limited liability company: G.T. MARKETING LLC
2. (a) Principal office address of limited liability company: 800 JEFFERY ST 404
BOCA RATON, FL
33487

(Note: **MUST BE STREET ADDRESS**)

- (b) Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

SAME

- 7-1-2010
3. Date of filing/registration in Florida

- L10000069955
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

UNITED STATES CORP. AGENTS

Registered Office Address:

1332 WINDING OAKS BLVD A
THUNDER FL
33612

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent:

TIMOTHY DEVALLE

NEW Registered Office Address:

800 JEFFERY ST 404

(**MUST BE FLORIDA STREET ADDRESS**)

BOCA RATON, FL
33487

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Timothy Devalle
Signature of a member or authorized representative of a member

TIMOTHY DEVALLE
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Timothy Devalle
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

FILED
11 MAY 16 PM 1:12
SECRETARY OF STATE
TALLAHASSEE, FL