

Electronic Filing Cover Sheet

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(((H16000153532 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023

: (850)205-8842

Fax Number

: (B50)878-536B

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC REGISTERED AGENT CHANGE GOSSLING HEBEI HOLDINGS, LLC

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JUN 24 2016

S. YOUNG

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Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

6/23/2016

INHS18 (2/14)

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Gossling Hebei Holdings, L	LC			
Name of Limited Liability Company				
Dear Sit or Madam:				
The enclosed Registered Agent/Registered Office	c Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this	matter to the following:			
Paul Gossling				
Name of Person	•			
Firm/Company				
10 Rogers Street, #521	·			
Address				
Cambridge, MA 02142				
City/State and Zip Code				
pgossling@opbglobal.com				
E-mail address: (to be used for future annua	ll report notification)			
For further information concerning this matter, pl	lease call:			
Paul Gossling	at (843 747-9812			
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 Tallahassec, Florida 32314			
Enclosed is a check for the following amount:				
60 \$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 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	ame of the limited liability company: Gossing H	enei Holdii	igs, LLC
2. (a)	10 Rogers Street, #521	(b)	10 Rogers Street, #521
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	,,	Mailing address of finited liability company:
			(Note: MAY BE POST OFFICE BOX) Cambridge, MA 02142
	Cambridge, MA 02142		Camphage, WA 02142
	12/27/2010		L10000131347
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	FuseForm, Inc.		
J. (4)	Registered Agent and Registered Office shown on the records of	of the Florida De	
	9838 Old Baymeadows Road		16 ALEC
	Registered Office Address (MUST HE FLORIDA STREET	ADDRESS)	
	Jacksonville , F	32256	16 JUN 23 PM
(b)	NRAI Services, Inc. Enter name of NEW Registered Agent and/or NEW Registered	ed Office addre	
	NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·
	1200 South Pine Island Road		
	Plantation , i	L 33324	
the cha agent v was/we	imited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited by authorized by an affirmative rate of the members cles of organization or the paragraph agreement of the	of the register liability comp of the limite	red office and the business office of the registered rany, it is hereby confirmed that the change(s) d liability company or as otherwise provided is sility company.
Signal	ture of a member or authorized representative of a member		Paul Gossling Printed or typed name of signee
I herei provisi the obl to mere notified	by accept the appointment us registered agent and agents of all statutes relative to the proper and completing to the proper and completing tions of my position as registered agent as providely reflect a change in the registered office address, I I in writing of this change. Michele Holden, Asst. Secret Registered Agent	gree to act in e performant ed for in Che hereby conf	**