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(((H150001382473)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : ROETZEL & ANDRESS

Account Number : I20000000121 Phone

: (239)649~6200

Fax Number

: (239)261~3659

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
Email Address: 5thompson@ralaw.com

LLC REGISTERED AGENT CHANGE GAJOMA REALTY, LLC

Certificate of Status Certified Copy 0 03 Page Count Estimated Charge \$25.00



JUN 10 2015

S. YOUNG

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Corporate Filing Menu

Help

TO: Registration Section

INHS18 (2/14)

#15000138247 3

COVER LETTER

Division of Corporations			
SUBJECT: Gajoma Realty, LLC, a Flor	rida limited lia	bility company	
	ne of Limited L	iability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Of	fice Change and	fee(s) are submitted for filing.	
Please return all correspondence concerning the	nis matter to the	following:	
Stephen E. Thompson, Esq.			
Name of Person		 -	
R&A Agents, Inc.			15 J
Firm/Company			雪里丁
850 Park Shore Drive, 3rd Floor			SSECTION IN THE D
Address			FLO ST.
Naples, FL 34103			M 8: 34 OF STATE E, FI ORIDA
. City/State and Zip Code			
sthompson@ralaw.com			
E-mail address: (to be used for future an	nual report noti	lication)	
For further information concerning this matter	r, please call:		
sthompson@ralaw.com	239	649-2709	
Name of Person		Area Code & Daytime Telep	hone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 illahassee, Florida 32314	
Enclosed is a check for the followin	g amount:		
S25 Filing Fee	□ s	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.	Na	me of the limited liability company: Gajoma Realty	<u>/, LLC</u>), a	a Flori	ida limited liability company
2	(a)	8150 NW 64th Street		b)	8150	NW 64th Street
	. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- \			Mailing address of limited liability company: (Note: MAYBE POST OFFICE BOX)
		Doral, FL 33166	-	-	Doral,	, FL 33166
			_	-	 _	
		03/22/2012		L	12000	0040709
3.		Date of filing/registration in Florida	4.			Document number
5.	(a)	Corporation Service Company				
٠.	(=)	Registered Agent and Registered Office shown on the records of th	e Floric	ia D	ept of S	State:
		1201 Hays Street				
		Registered Office Address MUST BE FLORIDA STREET ADDRESS				
		Tallahassee	32301	1-2	525	FILE:
,	•					
	(b)	Stephen E. Thompson, Esq.				— & &
	Enter name of NEW Registered Agent and/or NEW Registered O			fice address:		: 34 RIDA
	٠	R&A Agents, Inc.				٠
		NEW Registered Office Address:				
		850 Park Shore Drive, 3rd Floor				
		Naples _{FL} 3	34103	3		
the ag	cha ent v is/wa	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the l	s of th the reg bility of the lin imited	e S iste on mit	ered off pany, i ed liabi bility o	fice and the business office of the registered it is hereby confirmed that the change(s) wility company or as otherwise provided in company.
			St	ep	hen E	Thompson, Esq.
	•	ture of XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		_4 2	m dhin m	Printed or typed name of signee
printe to no R	oviși e obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change. Agents, Inc.	コタドエハドン	ทกท	ice oi n	my aunes, ana i am tamiliar with ana accept
Si	gnatu	of Relisters Agent den E. Thompson				
	_	Stant Secretar Division of Cornerations P.O. R.	ov 632	7.	Tallal	hassee, RL 32314

FILING FEE: \$25.00