

L120000690154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

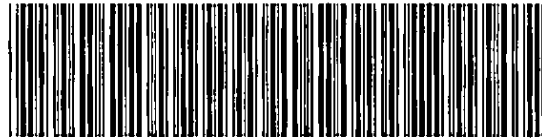
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

✓ SALLY  
OCT - 5 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GC AKREA 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:

Nikita Basdeo

\_\_\_\_\_  
Name of Person

Ganot Capital LLC

\_\_\_\_\_  
Firm/Company

4601 Sheridan Street, Suite 600

\_\_\_\_\_  
Address

Hollywood, FL 33021

\_\_\_\_\_  
City/State and Zip Code

nikitab@ganotcapital.com

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

For further information concerning this matter, please call:

Nikita Basdeo

954

985-2400

\_\_\_\_\_  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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

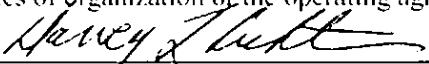
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR  
LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 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. Name of the limited liability company: GC AKREA LLC
2. (a) 4601 Sheridan Street, Suite 600  
Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)  
Hollywood, FL 33021
- (b) 4601 Sheridan Street, Suite 600  
Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)  
Hollywood, FL 33021
3. 07/11/2012  
Date of filing/registration in Florida
4. L12000090154  
Document number
5. (a) CT Corporation  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
- Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1200 South Pine Island Blvd  
Plantation, FL 33324
- (b) Etan Mark  
Enter name of NEW Registered Agent and/or NEW Registered Office address:
- Mark Migdal & Hayden  
NEW Registered Office Address:  
80 SW 8th Street, Suite 1999  
Miami, FL 33130

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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.

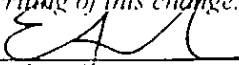


Signature of a member or authorized representative of a member

Harvey L. Lichtman

Printed or typed name of signee

*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 605, 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.*



Signature of Registered Agent