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Florida Department of State

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LLC REGISTERED AGENT CHANGE GYPSY 55, LLC

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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: GYPSY 55 L	rc							
2. (a)	2049 Venetlan Way		(b) 2049 Venetian Way						
()	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)						
	Winter Park, FL 32789		Winte	r Park, FL 32789					
	12/26/2012		L1200	0160185					
3.	Date of filing/registration in Florida	- 4.		Document number					
. , .	JOSEPH & BARRON								
5. (a)	Registered Agent and Registered Office shown on the records of 500 Longmeadow Street Registered Office Address (MUST BE FLURIDA STREET)			State:	19	KOIS/AID PARTS AND			
	Calabantian	247	47		80	5.			
	Celebration FI	347	4/		NOV 20	- 독면 도쿄~			
	JOSEPH E. BARRON					007.5			
(b)	Enter name of NEW Registered Agent und/or NEW Registerer	1.Offic	e addrest:		PX	중의하			
	2049 Venetian Way				4: 16	SIAIE			
	NEW Registered Office Address:					7,			
	Winter Park, FL 32789	327	89						
the ch agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ore authorized by an affirmative vote of the members icles of organization of the operating agreement of the attribute in member of authorized representative of a member	of the indilite of the limit	egistered of y company, limited liabled liability loseph E.	thice and the business office, it is hereby confirmed that bility company or as otherwicempany. Barron Printed or typed name of significations.	of the the cha ise prof	registered nge(s) rided in			
	by accept the appointment as registered agent and agents of all statutes relative to the proper and completely attors of my position as registered agent as providely reflect orchange in the registered office address, I din writing of this change	greu tu e perf da for heret	act in this prinance of in Claywir y confirm t	capacity. I further agree to my dutles, and I am familian 605, F.S. Or, if this docume hat the limited liability comp	comply with a rat it in vany he	y with the und accep eins filed is been			
•		Box 4	177a Telle	sheesee FT. 32314					

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

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