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Division of Corporations

March 30, 2020

MARC BELL 6800 BROKEN SOUND PKWY NW STE 200 BOCA RATON, FL 33487

SUBJECT: GENERAL EMPLOYMENT SERVICES LLC

Ref. Number: L13000002900

We have received your document for GENERAL EMPLOYMENT SERVICES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Letter Number: 120A00006931

Catherine M Wood Regulatory Specialist II

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: <u>General Employment S</u> Name of Limited Lia	Services LLC ability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and f	ec(s) are submitted for filing.	
Please return all correspondence concerning this matter to the fo	ollowing:	
Marc Bell Name of Person		
General Employment Services, LLC Firm/Company	- -	
6800 Broken Sound Pkwy NW, Su Address	<u>u</u> te 200	
BCCa Raton FL 33487 City/State and Zip Code	_	
mbell 2 marchell. com E-mail address: (to be used for future annual report notific	ca tion)	
For further information concerning this matter, please call:		
Marc Bell at (561) Name of Person) 988-1701 Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
□ \$25 Filing Fee □ \$5.	☐ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

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: <u>(1eneral E</u>	Employment Services LLC
2. (a) 10300 Broken Sound Pkwy NW Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) 6800 Broken Sound Pkwy NW Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
Suite 200	Suite 200
Boca Raton FL 33487	Boca Raton, FL 33487
1(1/2013	L1300000.1900
3. Date of filing/registration in Florida	4. Document number
5. (a) 10-Jean Figueira, Esq. Registered Agent and Registered Office shown on the records of the	e Florida Dept. of State:
16800 Broken Sound Picwy NW Registered Office Address MUST BE FLORIDA STREET AL	DDRESS)
Suite 200	
Boca Raton ,FL	33487
(b) Marc Bell	<u>~</u>
Enter name of NEW Registered Agent and/or NEW Registered C	Office address:
6800 Broken Sound Pkwy Nu	27
NEW Registered Office Address:	
Suite 200	7: 5!
Buca Raton ,FL	33487
If the limited liability company is not organized under the lawschange or changes are made, the Florida street address of the ragent will be identical. Or, in the case of a Florida limited liab was/were authorized by an affirmative vote of the members of the articles of organization or the operating agreement of the li	egistered office and the business office of the registered sility company, it is hereby confirmed that the change(s) the limited hability company or as otherwise provided in
	mare Bell- Membel
Signature of a member or authorized representative of a member	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