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| (Re | equestor's Name) | |
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| (Ac | ldress) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Ві | isiness Entity Nam | ne) |
| (Document Number) | | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
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B. BOSTICK FEB - 4 2013 **EXAMINER**

COVER LETTER

| TO: Registration Section : Division of Corporations | • |
|--|---|
| SUBJECT: GILERMAN PROPER Name of Limited I | |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office Ch | ange and fee(s) are submitted for filing. |
| Please return all correspondence concerning this mat | ter to the following: |
| MELISSA Name of Person | |
| ISL | |
| Firm/Company | |
| | · |
| TALLAHASSEE, FL 32301 | 13 FEB SECKLI TALLAHA |
| City/State and Zip Code | EB-I AM 10: 49 CLART OF STATE WHASSEE, FLORID |
| E-mail address: (to be used for future annual report notification | TORIE |
| For further information concerning this matter, pleas | |
| MELISSA at (| 656-7956 |
| 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 |

INHS18 (5/08)

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■ \$25 Filing Fee

Enclosed is a check for the following amount:

□ \$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 608.416 or 608.508, 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: GILERMAN PROPERT | IES LLC | |
|--|---|---|
| 2. (a) Principal office address of limited liability company | | |
| (Note: MUST BE STREET ADDRESS) | Apt. 1107 Mlaml Beach, FL 33139 | |
| (b) Mailing address of limited liability company: | 450 Alian Road | |
| (Note: MAY BE POST OFFICE BOX) | Apt. 1107 Mismit Beach, FL 33139 | |
| | | |
| 3. Date of filing/registration in Florida | 4. Document number | |
| <u> </u> | | |
| 5. (a) Registered Agent and Registered Office shown on | the records of the Florida Dept. | . of State: |
| Registered Agent: | Ronald Giferman | |
| Registered Office Address: | 450 Alton Road | 13 H |
| - | Apt. 1107 | |
| | Miami Beach, FL 33139 | S |
| (b) Enter name of NEW Registered Agent and/or NEV | W Registered Office address: | me 🗻 n |
| NEW Registered Agent: | Polena Gilerman | AN D |
| • | | 8 H |
| NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | 450 Alton Road Apt, 1107 | <u> </u> |
| 1 | Miami Beach | ,FL,33139 |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature of a member or authorized representative of a member | orida street address of the registical. Or, in the case of a Florid was/were authorized by an aff | stered office la limited irmative vote of |
| Ronald Gilerman, member Printed or typed name of signee | _ | |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision of and I am familiar with and accept the obligations of my po Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company | gree to act in this capacity. I fi sper and complete performance sition as registered agent as pr rely reflect a change in the reg has been notified in writing o | urther agree to 2 of my duties, ovided for in istered office f this change. |
| Signature of Registered Agent | | |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314