

217000081625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

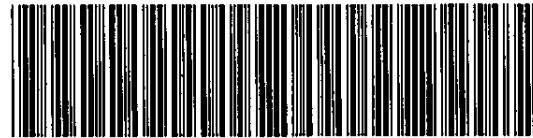
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700255273297

01/09/14--01004--013 **25.00

FILED
14 JAN 30 PM 2:21
STATE
TALLAHASSEE FL 32309

JAN 31 2013

3571



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 13, 2014

WALTER MORGAN
633 S FEDERAL HWY STE 400A
FT LAUDERDALE, FL 33301

SUBJECT: GLADSTONE GROUP, LLC
Ref. Number: L13000081625

We have received your document for GLADSTONE GROUP, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return the corrected original and one copy of 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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 014A00000782

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **GLADSTONE GROUP, 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:

WALTER L. MORGAN

Name of Person

MORGAN, OLSEN & OLSEN, LLP

Firm/Company

633 S. FEDERAL HWY., STE. 400A

Address

FORT LAUDERDALE, FL 33301

City/State and Zip Code

wmorgan@morganolsen.com

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

For further information concerning this matter, please call:

WALTER L. MORGAN at (**954**) **524-3111**

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 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: GLADSTONE GROUP, LLC

2. (a) Principal office address of limited liability company: 2449 DEL LAGO DR
FORT LAUDERDALE, FL 33318
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: SAME
(Note: MAY BE POST OFFICE BOX)

06/05/13 113000081825
3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: PATRICK G. KELLY

Registered Office Address: 1401 E. BROWARD BLVD., #208
FORT LAUDERDALE, FL 33301

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: Walter L. Morgan

NEW Registered Office Address: 633 S. FEDERAL HWY., STE. 400A
(MUST BE FLORIDA STREET ADDRESS) FORT LAUDERDALE, FL 33301

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.

Wm. D. McIntyre
Signature of a member or authorized representative of a member

William McIntyre, MGRM

Printed or typed name of signer

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 608, 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.

Mathias L. Morgan
Signature of Registered Agent

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

FILING FEE: \$25.00