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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: May 11, 2016

Order#: 130661/063

Re: GLL VII, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX____ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.	Na	me of the limited liability company: GLL VII, LLC				
2	(a)	5150 TAMIAMI TRAIL N SUITE 300	(b) 800 VA	ANDERBILT BEACH RD	
	(**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	y:
		NAPLES FL 34103		NAPLES	S, FL 34108	
		06/17/2013		L1300008	87230	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	SALVATORI WOOD & BUCKEL PL				
٥.	(4)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- le:	
		9132 STRADA PLACE, 4TH FLOOR				
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2	_	
					_	
		NAPLES , FI	34108	}	_	
	(b)	Corporation Service Company			Roman de la companya	
	• /	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	l Office ad	dress:	- 10 6	
					ARE Y	
		1201 Hays Street NEW Registered Office Address:			- <u>SA G GA</u>	
		NEW Registered Office Address.			PH IT	
					PH 12: J	
		Tellebasses	22204			
		<u>Tallahassee</u> , FI	32301		_	
the ag	e cha ent v as/we	mited liability company is not organized under the la nge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited li- tre authorized by an affirmative vote of the members clessor organization or the operating agreement of the	f the reginated the first fill for the limited	stered office ompany, it is lited liability liability com	te and the business office of the reging is hereby confirmed that the change ty company or as otherwise provide	stered (s)
_	Signat	ure of a number or authorized representative of a member			Printed or typed name of signee	
pr the to no	ovisi e obl mere tific	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I fin writing of this change	e perform ed for in (hereby c	ance of my of the confirm that is a second confirmation that is a	pacity. I further agree to comply wi duties, and I am familiar with and it 5, F.S. Or, if this document is being the limited liability company has be irby, Assistant Vice President	th the accept g filed een

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