13000117002

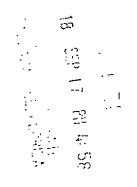
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SEP 2.0 2018

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	GDT 5780 TAYLOR ROAD	, LLC		
SUBJE	Name of Limited Liability Company			
Dear Si	ir or Madam:			
The end	closed Registered Agent/Registered Off	ice Change and	fce(s) are submitted for filing.	
Please	return all correspondence concerning th	is matter to the	following:	
Grego	ory D. Thomas			
	Name of Person		_	
	Firm/Company			
	rim/Company			
2880	Gulf Shore Blvd. N., #507			
	Address			
Naple	es, FL 34103			
	City/State and Zip Code			
gthom	nas@gregthomasinsurance.com			
E	-mail address: (to be used for future ann	ual report notif	ication)	
For fur	ther information concerning this matter,	please call:		
Grego	ory D. Thomas	239 at (598-9955	
	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	Re _t Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 lahassee, Florida 32314	
Enclosed is a check for the following amount:				
	■ \$25 Filing Fee	□ \$5	5 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>GDT 5780 TA</u>	
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)
2880 GULF SHORE BLVD. N., #507 NAPLES, FL 34103	2880 GULF SHORE BLVD. N., #507 NAPLES, FL 34103
8/19/2013	L13000117002
3. Date of filing/registration in Florida	4.Document number
5. (a) <u>R&A AGENTS, INC.</u> Registered Agent and Registered Office shown on the records	of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREET % PAUL K., HEUERMAN, ASSIST SECRET 850 PARK SHORE DR - THIRD FLOOR NAPLES, FL 34103-3587	
(b) <u>GREGORY D. THOMAS</u> Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u>	
GREGORY D. THOMAS	
NEW Registered Office Address: 2880 Gulf Shore Blvd. N., #507	
Naples	FL <u>34103</u>
the change or changes are made, the Florida street address registered agent will be identical. Or, in the case of a Florichange(s) was/were authorized by an affirmative vote of the provided in the articles of organization or the operating agentical street address registered agent will be identical. Or, in the case of a Florical street address registered agent will be identical. Or, in the case of a Florical street address registered agent will be identical. Or, in the case of a Florical street address registered agent will be identical. Or, in the case of a Florical street agent will be identical. Or, in the case of a Florical street agent will be identical. Or, in the case of a Florical street agent will be identical. Or, in the case of a Florical street agent will be identical. Or, in the case of a Florical street agent will be identical. Or, in the case of a Florical street agent will be identical. Or, in the case of a Florical street agent will be identical. Or, in the case of a Florical street agent will be identical.	da limited liability company, it is hereby confirmed that the he members of the limited liability company or as otherwise reement of the limited liability company. Creary D. Thoms Printed or typed name of signee
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered offi has been notified in writing of this change.	gree to act in this capacity. I further agree to comply with the ste performance of my duties, and I am familiar with and is provided for in Chapter 605, F.S. Or, if this document is ce address, I hereby confirm that the limited liability compan

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