Division of Corporations Electronic Filing Cover Sheet

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Email Address:

LLC REGISTERED AGENT CHANGE GORILLA CAPITAL LOAN SOLUTIONS, LLC

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Electronic Filing Menu

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Help

FEB - 6 2013

T. HAMPTON

2/5/2014

FLEISH - 12/16/2011 Weben Klewn Collec

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

ÇO	пра	int to the provisions of sections 605.0114. Flor ny submits the following statement in order to cha n the State of Florida.	ida Statutes, the undersigned nge its registered office or reg	limited liability istered agent, or		
I.	. Name of the limited liability company: Gorilla Capital Loan Solutions, LLC					
2.	(a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		y: 1342 High St. Eugene, OR 97401			
	(ь)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1342 High St. Eugene, OR 97401			
		6/2013	L13000120469			
3.	Da	te of filing/registration in Florida	4. Document number			
5.	(a)	(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		Registered Agent:	Nicolas Lampariello			
		Registered Office Address:	333 NW 1st Ave.			
			Fort Lauderdale, FL 33301			
	(b)	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:				
		NEW Registered Agent: NRAI Services, Inc.				
NEW Registered (MUST BE FLO		NEW Registered Office Address:	1200 South Pine Island Road			
		MUST BE FLORIDA STREET ADDRESS)	Plantation	FL 33324		
oc at life that /	nlir d th bili	limited liability company is not organized under the med that after the change or changes are made, the le husiness office of the registered agent will be ide ty company, it is hereby confirmed that the changed embers of the limited liability company or as others errating agreement of the limited liability company. The of a number or authorized representative of a member	Florida street address of the re- ntical. Or, in the case of a Flor s) was/were authorized by an a vise provided in the articles of	gistered office ida limited iffirmative vote of		
		Baker, Manager or typed name of signee				
/ con Con Con Bi		eby accept the appointment as registered agent and by with the provisions of all statules relative to the parties of the parti	agree to act in this capacity. proper and complete performan position as registered agent as merely reflect a change in the ri my has been notified in writing	l further agree to ice of my duties, provided for in egistered office of this change.		
		ire of Registered Agent Char McAdow, Assistant Secret	агу	7 S		
		Division of Corporations, P.O. Box	6327, Tallahassee, FL 32314	FÖ F		
IN	HSI	FILING FEE:	272'00	RET B		