

(Rec	questor's Name)				
(Add	dress)				
(Add	dress)				
(Cit	y/State/Zip/Phone	· #)			
PICK-UP	MAIT	MAIL			
(Bu:	siness Entity Nan	ne)			
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to I	Filing Officer:				





900299636929

05/26/17--01009--029 **25.00

SECRETARY OF STATE ALLAHASSEE, FLORIDA

FILED

D. BRUCE MAY 3 0 2017

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	GREEN GLOW DOCK LIG	HT, LLC		
	- 11000	ne of Limite	ed Liability Company	
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Off	fice Change	and fee(s) are submitted for filing	ıg.
Please	return all correspondence concerning th	is matter to	the following:	
Ron	Gregory			
	Name of Person			
Greg	ory Law Firm, PL			
	Firm/Company			
3801	Park Street North, Suite #4			
	Address	, , , , , ,		20 SH TAL
St. P	etersburg, FL 33709			21 HA ECRE
	City/State and Zip Code			2021 MAY 26 P 12: 36 SECRETARY OF STATE ALLAHASSEE, FLORIDA
rgreg	ory@gregorylaw.net			ا الله الله الله الله الله الله الله ال
F	E-mail address: (to be used for future and	nual report i	notification)	D IZ:
For fu	rther information concerning this matter	, please call	:	TE G
Ron (Gregory	727 at (374-9200	
	Name of Person	(Area Code & Daytime Tel	ephone 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	g amount:		
	2 \$25 Filing Fee		\$55 Filing Fee & Certified Co	ру

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

(a)	No Change	(b) No C	Change			
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	08/22/2014		L1400	0131865			
	Date of filing/registration in Florida	4.		Docume	ent number		
(a)	BRADLEY REUSCHER						
()	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of	State:			
	Registered Office Address (MUST BE FLORIDA STREET) 4604 49th St. North, Suite 122	ADDRES	<u>S)</u>		=		
	St. Petersburg , FL	33709)		ALLA	2021	
(b)	Ronald W. Gregory, II				HASS	2021 HAY 26	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	idress:		EE, FLO	77	FILED
	NEW Registered Office Address:				STATE	₽E 53	
	3801 Park Street North, Suite #4				•		
	St. Petersburg	33709)				
cha ent w s/we	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the fithe reg ability confithe line timited	e State o istered o ompany, nited lial liability	ffice and the it is hereby bility compar	business o confirmed ny or as oth	ffice of that the	the register change(s)
igna	ure of a member or authorized representative of a member				r typed name	of signee	- ,,
ovisi e obl mere	by accept the appointment as registered agent and agi ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change	ree to ac perforn d for in hereby c	et in this nance of Chapter confirm t	capacity. I f my duties, a 605, F.S. O hat the limite	further agro nd I am fan r, if this do ed liability	ee to cor niliar wi ocument compan	nply with t th and acc is being fil y has been

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

INHS18 (2/14)