5/14/2021

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

: (323)962-3889 Fax Number

Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please.

Email Address:__

LLC REGISTERED AGENT CHANGE GCS UNITED LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

COVER LETTER

TO: Registration Section Division of Corporations

GCS UNITED LLC

Page: 3 of 4

Name of Limited Liability Company

Dear Sir or Madam:

SUBJECT:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cheyenne Moseley						
Name of Person						
Legalzoom.com, Inc.						
Firm/Company						

101 N. Brand Blvd., 10th Floor

Address

Glendale, CA 91203

City/State and Zip Code

joncosky@icloud.com

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

For further information concerning this matter, please call:

Cheyenne Moseley 800 Area Code & Daytime Telephone Number Name of Person

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 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:	GCS UNITED LI	LC	
2. (a)	5575 South Semoran Blvd	Suite 36	(b) 5411 E	Dunleith Ln.
()	Principal office address of limited lial (Note: MUST BE STREET A)		(0)	Meiling address of limited liability company: (Nate: MAY BE POST OFFICE BOX)
	Orlando, FL 32822		Spring,	TX 77379
	10/07/2014		L14000	157124
3.	Date of filing/registration in	Florida	4.	Document number
5. (a)	SPIEGEL & UTRERA, P.A.			21
• •	Registered Agent and Registered Office show 1840 SW 22nd St. 4th Floor	n on the records of the F	Porida Dept. of St	ance:
	Registered Office Address (MUST BE FI	ORIDA STREET ADD	RESS _I	
	Miami	, FL 33	145	PH 4:49
(b)	UNITED STATES CORPORAT	ION AGENTS, I	NC.	_
	Enter name of NEW Registered Agent and/o	r NEW Registered Off	ice address:	-
	5575 S. Semoran Blvd., Suite	36		
	NEW Registered Office Address:			_
	Orlando	, FL ³²	822	
he cha igent w vas/we he arti	mited liability company is not organizing or changes are made, the Florida will be identical. Or, in the case of a F	eed under the laws of street address of the lorida limited liabil if the members of th greement of the lim	of the State of F registered officity company, it is stimited liabil	
l herel provisi he obli o mere wiified	by accept the appearment as registere	ed agent and agree to er and complete per agent as provided fo ffice address, I hero ISTANT SECRETARY, U	formance of my r in Chapter 60 by confirm tha	pacity. I further agree to comply with the watter, and I am Jamiliar with and accepts. S. Or. if this document is being filed the limited liability company has been