4000162116

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COVER LETTER

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TO:	Registration Section Division of Corporations					
SUBJE	BIGFOLDER GROUP, LLC	BIGFOLDER GROUP, LLC				
SODJE		ne of Limited L	iability Company			
Dear Si	r or Madam:					
The end	closed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.			
Please 1	return all correspondence concerning th	is matter to the	following:			
KATH	Y FOSSES					
	Name of Person					
	Firm/Company					
1499	N. GATEWOOD AVENUE					
	Address	/ ////////////////////////////////////	_			
PALA	TINE, IL 60067					
	City/State and Zip Code		_			
kfosse	es@gmail.com					
E-	-mail address: (to be used for future ann	ual report notif	fication)			
For furt	ther information concerning this matter,	please call:				
KATH	Y FOSSES	at (697-9433			
	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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the following	ed is a check for the following amount:				
,	\$25 Filing Fee	□ \$:	55 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.	Na	me of the limited liability company:	GROL	JF	/P, LLC
2.	(a)	Principal office address of limited liability company:	_ (b)	Mailing address of limited liability company:
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1499 N. GATEWWOD AVE.			1499 N. GATEWOOD AVE.
		PALATINE, IL 60067			PALATINE, IL 60067
		10/17/2014		L	L14000162116
3.		Date of filing/registration in Florida	4.	_	Document number
5.	(a)	KARAMALEGOS EVANGELOS			
٥.	(4)	Registered Agent and Registered Office shown on the records of 1232 PERSIMMON DRIVE	the Florid	ia l	a Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u> </u>
					75 1 5 1
		HOLIDAY , FI	34691	1	NOV -9
(b)	(b)	MARIA KASTRITSOS C/O OLYMPIC REALT			RVICES 📆 📜 📆
	` '	Enter name of NEW Registered Agent and/or NEW Registered Office address:			ldress:
		105 E. TARPON AVENUE			
		NEW Registered Office Address:			
		TARPON SPRINGS	24690	`	
		TARPON SPRINGS FI	34689	, 	
the age was	cha ent v s/we	mited 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 liner authorized by an affirmative vote of the members of the organization or the operating agreement of the	f the reg ability c of the lir limited	ist or mi lia	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
<u>_</u> S	ignat	ure of a member or authorized representative of a member			Printed or typed name of signee
pro the to i	visi obli nere	by accept the appointment as registered agent and agons 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 in writing of this change.	ree to ac perforn ed for in hereby c	ct i na. Ci coi	t in this capacity. I further agree to comply with the cance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
Sig	<i>III</i> natui	c of Registered Agent			