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From:

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: (307)200-2803

Fax Number

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LLC REGISTERED AGENT CHANGE **GYPSYS CART, LLC**

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S. PRATHER

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: Gypsy's C	art, l	_LC			<u>.</u>		
	(a) 411 Walnut St.			(b) 411 Walnut St.					
Ĺ.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Ma	iling address of Note: MAY BE				
		#10321		#10321					
		Green Cove Springs, FL 32043		Green Co	ve Springs,	FL 3204	3		
		11/12/2014	L	.1400017	75553		ب		
3.		Date of filing/registration in Florida	4.	Ľ	ocument nun	nber	2018 DEC 20		
5	(0)	UNITED STATES CORPORATION AGENTS	, INC.			ALL	民	and the	
٠.	(a)	Registered Agent and Registered Office shown on the records of th		Dept_of State:		之.:	2(Services .	
		13302 WINDING OAK COURT				P.5		FV7	
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)			SEC	. <u>I</u>	7	
		SUITE A				يار ن.ر	AH 11: 05		
		TAMPA ELS	33612			1	ું જા		
	(b)	Registered Agents Inc. Enter name of NEW Registered Agent and/or NEW Registered C 7901 4th St N NEW Registered Office Address	Office add	<u>''ess</u> .					
		STE 300							
		St. Petersburg ,FL	33702						
the ag	e cha ent v is/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited hal ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the 1	the regist bility cor Tthe limi	ered office a npany, it is l ted liability	and the busin- hereby confir company or a	ess office o med that th	I the reg e chang	gistered c(s)	
_		Teiling Pel	Rile	/ Park	Printed or typed	nama of sign			
r		ture of a member or authorized representative of a member	na ta aat	in this sand	ein Liwtha	r agree to c	ample u	sith the	
pr th to	ovis: e obi mer ulie	by accept the appointment as registered agent and agre- tions of all statutes relative to the proper and complete t ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had my riting of this change.	performa for in C ereby co	nce of my di hapter 605, nfirm that th	ties, and Lar F.S. Or, if the le limited liab	n familiar v is document bility compo	vith and it is beir iny has	l accept 19 filed been	
Si		Bill Havre - Presider	IL						