

L14000 181297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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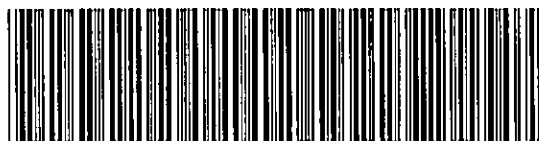
(Business Entity Name)

(Document Number)

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C. GOLDEN

AUG - 9 2019

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. Name of the limited liability company: GRS Asset management, LLC

2. (a) 4625 E Bay Dr Ste 222 (b) Same as in 2(a)
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Clearwater, FL 33764

3. 11/21/14 4. L14000181297
Date of filing/registration in Florida Document number

5. (a) B+C Corporate Services 2 centd FL
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
390 North Orange Ave suite 1400
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Orlando FL 32801

(b) George Solomon
Enter name of NEW Registered Agent and/or NEW Registered Office address:

4625 E Bay Dr # 222
NEW Registered Office Address:

Clearwater FL 33764

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after
the change or changes are made, the Florida street address of the registered office and the business office of the registered
agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s)
was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the articles of organization or the operating agreement of the limited liability company.

George Solomon
Printed or typed name of signee

[Signature]
Signature of a member or authorized representative of a member

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the
provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept
the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed
to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been
notified in writing of this change

[Signature]
Signature of Registered Agent

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

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