L15 0000 6 22 FG

• (Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nai	me)			
(Document Number)					
Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer:					
		;			





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05/13/16--01027--016 **25.00



MAY 16 2016 J SHIVERS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: May 11, 2016

Order#: 130661/069

Re: GLL XV, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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. N	ame of the limited liability company: GLL XV	, LLC				
2. (a)	800 VANDERBILT BEACH RD	(1	b)			
,	Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)		/ 	Mailing address of lin	•	
	NAPLES FL 34108	3				
	04/08/2015		L15000	062289		
3.	Date of filing/registration in Florida	4.		Document numb	per	
5. (a)	SALVATORI LEO J					
(,	Registered Agent and Registered Office shown on the re	ecords of the Florid	a Dept. of St	ate:		
	9132 STRADA PL					
	Registered Office Address (MUST BE FLORIDA S	TREET ADDRES.	<u>S)</u>			
	FOURTH FLOOR					
	NAPLES	, FL <u>3410</u>	8		16 17.00	
41.5	Comparation Society Company				AWA C	
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Re	egistered Office ad	ldress:			*
						ļ.,
	1201 Hays Street				E	9° 7° 11° 12° 12° 12° 12° 12° 12° 12° 12° 12
	NEW Registered Office Address:				AM II: 22 OF STATE LORIDA	other page.
	Tallahaanaa	0000				
	Tallahassee	, FL <u>3230</u>	1	_		
the ch agent was/w	limited liability company is not organized under ange or changes are made, the Florida street add will be identical. Or, in the case of a Florida linguistry were authorized by an affirmative vote of the me ticles of organization or the operating agreement	dress of the regi mited liability c mbers of the lin	istered offi ompany, it nited liabil	ce and the busines is hereby confirmative company or as	s office of the ed that the cha	registered inge(s)
	Xie E agni		Cilmi, Auth	norized Person		
	ature of a member or authorized representative of a member			Printed or typed na	_	
provis the ob to mer notifie	eby accept the appointment as registered agent sions of all statutes relative to the proper and colligations of my position as registered agent as rely reflect a change in the registered office address in the registered office address in the registered of this change.	omplete perform provided for in dress, I hereby c	nance of m Chapter 60 confirm tha	y duties, and I am j 05, F.S. Or, if this at the limited liabil	familiar with a document is b ity company h	and accept peing filed as been
Signat	ure of Registered Agent Corporation Service Com	npany BY: C	Grace E. K	Lirby, Assistant V	ice Presi	ident