

L15 0000 95507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

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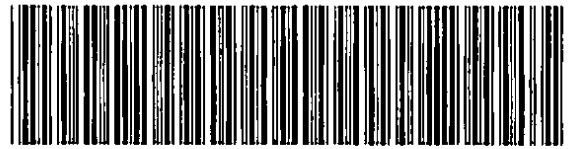
Special Instructions to Filing Officer:

Q. SILAS

June 5 2022

6/23/22

Office Use Only



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04/08/22--01014--002 **25.00

FILED
JUN 23 PM 6:13
SECRETARY OF STATE
TALLAHASSEE, FL



RECEIVED

2022 JUN 23 AM 8:00

FLORIDA DEPARTMENT OF STATE
Division of Corporations, Tallahassee, FL

May 10, 2022

2A INTERNATIONAL TAX ADVISORS LLC
1001 BRICKELL BAY DR. STE 2406
MIAMI, FL 33131

SUBJECT: GB HALLANDALE LLC
Ref. Number: L15000095507

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent signature is illegible and not acceptable for imaging.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Silas
Regulatory Specialist II

Letter Number: 322A00010716

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GB HALLANDALE LLC

Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Name of Person

2A International Tax Advisors LLC

Firm/Company

1001 Brickell Bay Dr. Ste.2406

Address

Miami, FL, 33131

City/State and Zip Code

corporateservices@2atax.com

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

For further information concerning this matter, please call:

Cristina Teixeira

305
at ()

330-1581

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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. Name of the limited liability company: GB HALLANDALE LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
2652 NE 189 STREET AVENTURA, FL 33180

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)
2652 NE 189 STREET AVENTURA, FL 33180

3. 06/01/2015 Date of filing/registration in Florida

4. L15000095507 Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Clavero, Cesar A

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
11767 South Dixie Highway Suite 447 Pinecrest,
FL 33156

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

2A International Tax Advisors LLC

NEW Registered Office Address:
1001 Brickell Bay Dr. Ste. 2406, Miami
FL 33131

FILED
2022 JUN 23 PM 6:43
SECRETARY OF STATE
TALLAHASSEE, FL

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.

Signature of a member or authorized representative of a member Marcelo Guimarães Franco
Printed or typed name of signee

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 of Registered Agent