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(Address)						
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
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(Document Number)						
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: CSC/PH - FL TAL *

From: Grace Kirby grace.kirby@cscglobal.com

Date: May 11, 2016

Order#: 130661/071

Re: GLL XVII, 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.	Na	me of the limited liability company: GLL XVII, LLC			
2	(a)	800 VANDERBILT BEACH RD	(b)	`	
۷.	(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		NAPLES FL 34108	_		
		06/11/2015		L1500010	2050
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	SALVATORI LEO J			
٥.	(α)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of State	::
		9132 STRADA PL			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		NAPLES , FL_	34108		TO MA
	(b)	Corporation Service Company			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	office add	<u>lress</u> :	$\frac{\omega}{2}$
		1201 Hays Street			AHII: 33
		NEW Registered Office Address:			Riba
		Tallahassee ,FL	32301		
the ag	cha ent v is/we	imited liability company is not organized under the lawsunge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	s of the he regis pility co	tered office mpany, it is ited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
		Xie & Court	Jill C	Cilmi, Autho	rized Person
•	Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
pre the to no	ovisi e obl mere tifke	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I he Jin writing of this change:	performa for in C preby co	ance of my of Chapter 605 Onfirm that	duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
Si	gnātu	re of Registered Agent Corporation Service Company	BY: G	race E. Kir	by, Assistant Vice President

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