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(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

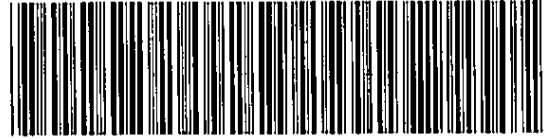
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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2019 JUL 22 AM 11:13

SECRETARY OF STATE  
TALLAHASSEE, FL

JUL 29 2019

C. Kinsey

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Gloria James Event Rentals

\_\_\_\_\_  
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:

Gloria Gelin

\_\_\_\_\_  
Name of Person

Gloria James Event Rentals

\_\_\_\_\_  
Firm/Company

PO Box 841

\_\_\_\_\_  
Address

Groveland, FL 34736

\_\_\_\_\_  
City/State and Zip Code

gloriajamesrentals@yahoo.com

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

For further information concerning this matter, please call:

Gloria Gelin

352

559-3561

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

~~\$25~~ ☒ \$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.

Name of the limited liability company: Gloria James Events Rentals LLC

(a) Street Address (b) Mailing Address

Principal office address of limited liability company:  
(Note: MUST BE STREET ADDRESS)

Mailing address of limited liability company:  
(Note: MAY BE POST OFFICE BOX)

608 Del Pilar Drive  
Groveland, Florida 34736

PO Box 841  
Groveland, Florida 34736

6/12/2015

11000062728

3. Date of filing/registration in Florida 4. Document number

5. (a) James Gelin  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State

James Gelin

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

608 Del Pilar Drive

Groveland, FL 34736

(b) Gloria Gelin

Enter name of NEW Registered Agent and/or NEW Registered Office address

Gloria Gelin

NEW Registered Office Address:

608 Del Pilar Drive

Groveland, FL 34736

**FILED**  
**2019 JUL 22 AM 11:13**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**

If the limited liability company is not organized under the laws of the State of Florida, 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: Gloria Gelin

CLERK OF COURT

I hereby accept the appointment as registered agent and I agree to comply with the provisions of all statutes relative to the proper and complete performance of 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.