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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

Fax Number

1 (850)617-6383

: (561)694-1639

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.**

Bmail Address:

LLC REGISTERED AGENT CHANGE CORAL GABLES DEVELOPMENT GROUP, LLC

Certificate of Status	0
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SECRETARY OF STATE
OF AHASSEE FLORIDA

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Corporate Filing Menu

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: Coral C	Gables Development Group, LLC	
2. (a) Principal office address of the limited liability comapny:	4942 LEJEUNE ROAD 203	
(Note: MUST BE STREET ADDRESS)	CORAL GABLES FL 33146	
(b) Mailing address of limited liability company:	4942 LEJEUNE ROAD 203	
(Note: MAY BE POST OFFICE BOX)	CORAL GABLES FL 33146	
8/24/2015	L15000144449	
3. Date of filing/registration in Florida	4. Document number	
5.(a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State;	
Registered Agent:	INCORP SERVICES, INC.	
Rogistered Office Address:	17888 67TH COURT NORTH	
	LOXAHATCHEE FL 33470	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW R</u>	egistered Office address:	
NEW Registered Agent:	Corporate Creations Network Inc.	
NEW Registered Office Address:	11380 Prosperity Farms Road #221E	
(MUST BE FLORIDA STREET ADDRESS)	Palm Beach Gardens FL 33410	
or changes are made, the Florida street address of the registered	it is hereby confirmed that the change(s) was/were authorized by	
(Signature of a member or authorized representative of a member)		
by Lauren Vadney as attorney-in-fact (Printed or Typed name of signee)		
of all statutes relative to the proper and complete performance of	to act in this capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obligations of F.S. Or, if this document is being filed to merely reflect a change I liability company has been notified in writing of this change. Lauren Vadney, Special Secretary	
(Signature of Registered Agent) Division of Corporations, P.O. B		
INHS18(10/99)		
Corporate Creations International Inc.		
11380 Prosperity Farms Road #221E Palm Beach Gardens FL 33410 (561) 694-8107	ETARY OF	
H16000313780	Copyer (# 1993-2016 CC	

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STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Sta	tutes, I hereby submit the following Sta	atement of Termination:
FIRST: The name of the limited liability co	ompany is:	
Graebel/Jacksonville Movers, LLC		
SECOND: The Florida Document number of	of the limited liability company is: <u>L1</u>	5000000239
THIRD: The date of filing of the initial arti	cles of organization is: 12/31/2014	
FOURTH: The date of filing of the dissolu	tion is: 12/20/2016	·
FIFTH: This limited liability company has that it will file a statement of termination.	completed winding up its activities and	d affairs and has determined
Signature of Authorized Representative	Christopher Preston Typed or printed name of signature	
Certi	Filing Fee: \$25.00 filed Copy; \$30.00 (optional)	