

J. LEGGETT
FEB 13 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GIANKARLA INTERNATIONAL 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:

GENNARO J CONCOLINO

Name of Person

C&A ACCOUNTING ASSOCIATES PC

Firm/Company

114 KREISCHER RD STE 6A

Address

NORTH SYRACUSE, NY 13212

City/State and Zip Code

GENO@CNYTAX.COM

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

For further information concerning this matter, please call:

GENNARO J CONCOLINO at (315) 452-5760
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

☐ \$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: GIANKARLA INTERNATIONAL LLC
2. (a) GENNARO CONCOLINO (b) C&A ACCOUNTING ASSOCIATES PC
- Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
- STRAWBERRY LANE #293 114 KREISCHER RD STE 6A
ZEPHYRHILLS, FL 33541 NORTH SYRACUSE NY 13212
- JANUARY 15, 2016 L16000011294
3. Date of filing/registration in Florida 4. Document number

5. (a) SANDRA PINO
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

SANDRA PINO

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

3627 PONCE DE LEON BLVD

CORAL GABLES, FL 33134

- (b) GENNARO CONCOLINO

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

GENNARO CONCOLINO

NEW Registered Office Address:

STRAWBERRY LANE #293

ZEPHYRHILLS, FL 33541

FILED
18 FEB 12 AM 9:50
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

X Gianpiero Marcoccia
Signature of a member or authorized representative of a member

GIANPIERO MARCOCCIA

Printed or typed name of signer

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]
Signature of Registered Agent

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