

L16 0000 88079

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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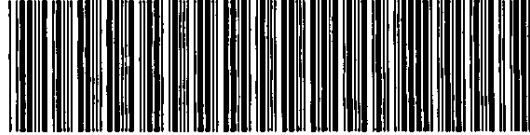
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
CLERK, CLERK

JUN 23 2016
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GPH 2014 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:

Jovan D. Gutic

Name of Person

GPH 2014 LLC

Firm/Company

10814 NW 51st Trail

Address

Doral/FL 33178

City/State and Zip Code

Jovan.Gutic@factronicsusa.com

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

For further information concerning this matter, please call:

Jovan Gutic

Name of Person

at (305) 206 5149

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

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SECRETARY OF STATE
TALLAHASSEE, FL 32301

**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: GPH 2014 LLC
2. (a) 10814 NW 51st Trail Principal office address of limited liability company:
(Note: **MUST BE STREET ADDRESS**)
Doral, FL, 33178
- (b) 10814 NW 51st Trail Mailing address of limited liability company:
(Note: **MAY BE POST OFFICE BOX**)
Doral, FL, 33178

3. May 04, 2016 Date of filing/registration in Florida
4. L16000088079 Document number

5. (a) Jovan D. Gutic
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

10050 NW 116 Way suite 11
Medley FL . FL 33178

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

NEW Registered Office Address:

10814 NW 51st Trail
Doral . FL 33178

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]
Signature of a member or authorized representative of a member

Jovan D. Gutic
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]
Signature of Registered Agent

16 JUN 22 AM 11:02
CERTIFIED MAIL
FILED