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COVER LETTER

TO: Registration Section Division of Corporations

GOLDELM AT BALDWIN PARK, LLC

SUBJECT:

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:

VANESSA BERTUCA

Name of Person

GOLDELM

Firm/Company

7000 MAE ANNE AVE OFFICE

Address

RENO NV 89523

City/State and Zip Code

accounting@goldelm.com

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

For further information concerning this matter, please call:

VANESSA BERTUCA

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:

747-7500

775

at (____

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.

7000 MAE A	NNE AVE	(b) 70	(b) 7000 MAE ANNE AVE		
Principal c	ffice address of limited liability compa- <u>m MUST BE STREET ADDRESS</u>)	· · · ·	Mailing address of limited liab (Note: MAY BE POST OF	• • •	
OFFICE			FICE		
RENO NV 8	9523	RE	ENO NV 89523		
05/12/2016		L16	000093054		
Date o	f filing/registration in Florida	4.	Document number		
MOSES, MI	CHAEL				
	nd Registered Office shown on the ree-	ards of the Florida Dept	L of State:		
heginered agent	e e				
12443 SAN	-				
12443 SAN	-	REET ADDRESS)			
12443 SAN	JOSE BL	<u>REET ADDRESS)</u>			
12443 SAN Registered Office	JOSE BL Address <u>(MUST BF FLORIDA ST</u>	32223			
12443 SAN Registered Office SUITE 604	JOSE BL Address <u>(MUST BE FLORID.) ST</u> ILLE			18	
12443 SAN Registered Office SUITE 604 JACKSONV	JOSE BL Address <u>(MUST BE FLORID.) ST</u> ILLE	_, FL_32223	· · · · · · · · · · · · · · · · · · ·	18 .10	
12443 SAN Registered Office SUITE 604 JACKSONV	JOSE BL Address <u>(MUST BF FLORID.1 ST</u> ILLE RODERICK <u>W Registered Agent</u> and or <u>NEW Reg</u>	_, FL_32223	· · · · · · · · · · · · · · · · · · ·	07 ant 91	
12443 SAN Registered Office SUITE 604 JACKSONV HUBBARD, I Enter name of <u>NE</u>	JOSE BL Address <u>(MUST BF FLORID.1 ST</u> ILLE RODERICK <u>W Registered Agent</u> and or <u>NEW Reg</u> TH ST	_, FL_32223	· · · · · · · · · · · · · · · · · · ·	ŬŽ	
12443 SAN Registered Office SUITE 604 JACKSONV HUBBARD, F Enter name of <u>NE</u> 5333 SW 75	JOSE BL Address <u>(MUST BF FLORID.1 ST</u> ILLE RODERICK <u>W Registered Agent</u> and or <u>NEW Reg</u> TH ST	_, FL_32223	· · · · · · · · · · · · · · · · · · ·		

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.

HM1 an Signature of a member or authorized representative of a member-

RODERICK R HUBBARD

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 of Registered Agent

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

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