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J. HARRIS

COVER LETTER

INHS18 (2/14)

TO:	Registration Section Division of Corporations		
SUBJE	Geffken Group, PLLC		
	Nam	ne of Limited	Liability Company
Dear Si	r or Madam:		
The end	closed Registered Agent/Registered Off	ice Change ai	nd fee(s) are submitted for filing.
Please i	return all correspondence concerning th	is matter to th	ne following:
Gary (Geffken, PhD		
	Name of Person	·····	
Geffke	en Group, PLLC		
	Firm/Company		
2833	NW 41st Street, Suite 140		
	Address		
Gaine	sville, FL 32606		
	City/State and Zip Code		
Geffke	engroup@gmail.com		
E-	mail address: (to be used for future ann	ual report no	tification)
For furt	ther information concerning this matter,	please call:	
Gary (Geffken, PhD	352	377 1426
	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	F [F	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Fallahassee, 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. N	ame of the limited liability company: Geffken Grou	up, PLL	<u>C</u>				
2. (a)	2833 NW 41st Street, Suite 140	(ł	o)				
(-)	Principal office address of limited liability company:			Mailing address of limit		-	
	(Note: MUST BE STREET ADDRESS) 2833 NW 41st Street, Suite 140			(Note: MAY BE PO.	<u>SI UFFI</u>	<u>ICE B</u>	<u>U.V</u>
	Gainesville, FL 32606						<u>, </u>
	05/03/2018		L160001	10519			
3.	Date of filing/registration in Florida	4.		Document number	•		
5. (a)	Sui Generis Law, PLLC						
` '	Registered Agent and Registered Office shown on the records of	f the Florid	a Dept. of State	- e:			
				_			
	Registered Office Address (MUST BE FLORIDA STREET 215 SW 3rd Avenue	ADDRES.	<u>s)</u>	- :	···•	re:	
	Gainesville,	32601	-	- :			- Y-
(b)	Gary Geffken, PhD Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	dress:	- - - :		Y 14 PH 2:	in the second se
	Geffken Group, PLLC						•
	NEW Registered Office Address:		<u> </u>	-	?+ ·		
	2833 NW 41st Street, Suite 140			_			
	Gainesville , FI	_32606		_			
Signa I here provisite metric	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lierce authorized by an affirmative vote of the members of icles of organization or the operating agreement of the ture of a member or authorized representative of a member by accept the appointment as registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address. It is not that the change is the registered of the change of this change. Division of Corporations P.O.	f the reginability confidence limited acree to accept for in the confidence of the c	stered office ompany, it is nited liability con liability con this cape of my confirm that	e and the business of shereby confirmed y company or as oth npany. Printed or typed name acity. I further agriduties, and I am fan for the limited liability	office of that the nerwise of signer	f the e cha prov	registered nge(s) vided in

FILING FEE: \$25.00

INHS18 (2/14)