## L1600194011

(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	☐ MAIL
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Certified Copies	_ Certificates of	Status
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J. HARRIS

## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GOLDEN BALLLC  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:
MOISES JAFIF Name of Person
GOIDEN BALLUC Firm/Company
655 Hibiscus Dr. Address
Hallandale Beach FL 33009  City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MOISES JAFIF at (305) 537, 4306  Name of Person Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building Clifton 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 \$25 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: GODEN BOLLIC
2. (a) 655 Hibisus Dt. (b) 655 Hibisus Dt.  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (Note: MAY BE POST OFFICE BOX)
HALLANDALE BEACH, FL HALLANDALE BEACH, FO
10/20/2016 L16000194011  3. Date of filing/registration in Florida 4. Document number
5. (a) EGAINC CORPORATE SERVICES INC.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
SOUNTER IN COMMONS Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
FORT MYERS .FL 33907  (b) MOISES JAFIE Enter name of NEW Registered Office address:
NEW Registered Office Address:
HALLANDALE BEACH,
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 of a member praathorized representative of a member  Printed or typed name of signee  I hereby accept the abpointment 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 charge in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this charge.
Signature of Registered Agent

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