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S. PRATHER

## **COVER LETTER**

TO: Registration Section Division of Corporations	
·	
SUBJECT: GTMJ BOCA, LLC	
Name of	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 r	matter to the following:
Erick D. Langenbrunner, Esq.	
Name of Person	
Holding Company of The Villages, Inc.	
Firm/Company	······································
3619 Kiessel Road	
Address	
The Villages, Florida 32163	
City/State and Zip Code	
legalnotices@thevillages.com	
E-mail address: (to be used for future annua	report notification)
For further information concerning this matter, ple	ease call:
Christi Jacquay	at ( 352 ) 753-6612
Name of Person	at ( 352 ) 755-0012  Area Code & Daytime Telephone Number
	·
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section
Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	Tununussee, Trontaa 52514
Enclosed is a check for the following ar	mount:
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

## 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.

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2163
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confirmed that after office of the registered d that the change(s) otherwise provided in eq.  The of signee gree to comply with the amiliar with and accept document is being filed by company has been
(1)

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