## L17000071220

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(Re	questor's Name)
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PICK-UP	WAIT MAIL
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(Bu	siness Entity Name)
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(Do	cument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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TALLANIASSEE FLORIDA
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MAY 11 2017 S. YOUNG

## **COVER LETTER**

Registration Section

TO:

INHS18 (2/14)

Division of Corporations						
SUBJECT:						
Na	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Of	ffice Change and fee(s) are submitted for filing.					
Please return all correspondence concerning t	his matter to the following:					
JOSE GOMEZ						
Name of Person						
G&C MULTI SERVICES LLC						
Firm/Company						
5315 8TH ST CT W						
Address						
BRADENTON, FL 34207						
City/State and Zip Code						
corderoagency@yahoo.com						
E-mail address: (to be used for future an	nual report notification)					
For further information concerning this matter	r, please call:					
JOSE GOMEZ	941 301-6433 at ()					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section					
Division of Corporations Division of Corporations						
Clifton Building						
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314					
Enclosed is a check for the followin	g 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

(a),	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(t	o)	Tailing address of limited li	ability company:
	5315 8TH ST CT W		5315 8TI	HST CT W	HICE BOA
	BRADENTON, FL 34207		BRADEN	ITON, FL 34207	
	03/29/2017		L1700007	1220	
	Date of filing/registration in Florida	4.		Document number	-
(a)	MARK URTZ				TAN EN
	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State		HAY -8
	MARK URTZ				A AS
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRESS	<u></u>		m
	22465 HERNANDO AVE				3
	PORT CHARLOTTE , F	L_33952			9: 26
(b)	JOSE GOMEZ				_
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office ad	dress:		
	JOSE GOMEZ				
	NEW Registered Office Address:				
	5315 8TH ST CT W				
	BRADENTON	L_34207			

ignature of a member or authorized representative of a member

JOSE GOMEZ

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