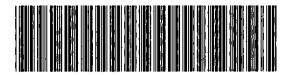
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PICK-UP WAIT MAIL							
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(Business Emily Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

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SECRETARY OF STATE
SECRETARY OF STATE

S Warren MAY - 5 2017

THE LAW OFFICES OF LORENE SEELER YOUNG, P.A.

VIA FEDERAL EXPRESS

May 2, 2017

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE:

NEW GBRM, LLC

OUR FILE:

80046-50 / 17-0110

To whom it may concern:

Enclosed please find the statement of change, articles of organization and check number 3994 in the amount of \$50,00 for the filing fees. Please

If you need anything further or have any questions, please do not hesitate to contact me.

Sincerely yours,

LORENE SEELER YOUNG, P.A.

Enclosures

9124 Griffin Road, Cooper City, Florida 33328

Phone: (954) 585-3967 Facsimile: (954) 585-3987 Email: Emily@Lsy-Law.com

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.	Na	me of the limited liability company: NEW GBRM,	LLC				
2. (8402 AVENUE K	(ູ 17395 ເ	OX TRAIL	LANE	
- . (,	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)	_	,	_	s of limited liability company BE POST OFFICE BOX)	:
		BROOKLYN NY 11236	- -	LOXAH	ATCHEE F	FL 33470	
		APRIL 20, 2017		L170000	88231		
 3. 5. 	(a)	Date of filing/registration in Florida RUBY THOMPSON	4.		Document r	number	
	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 17157 40TH RUN			- e:		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		LOXAHATCHEE , FL	33470		- -	17 MAY SECRET	d A
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office at	ldress:	• . 	FILED TARY OF S	1
		NEW Registered Office Address:			- ;	ORDE OR	•
		17395 FOX TRAIL LANE			-		
		LOXAHATCHEE, FL	33470)	_		
the age was	cha nt v	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reginability confirmation of the linited	istered offic ompany, it nited liabili liability co	e and the bustis hereby corty company of the means of the	siness office of the regis afirmed that the change(stered (s)
	ane	Redy Thompson ture of a member or authorized representative of a member	<u> </u>	RUBY THOMPSON Printed or typed name of signee			
I hi pro the to n	ere visi obi ner	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I id in writing of this change.	ee to ac perforn d for in hereby c	et in this cap nance of my Chapter 60 confirm that	and I find	her agree to comply wit	h the sccept filed en

Signature of Registered Agent