(((H23000068559 3)))



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To:

Division of Corporations

Fax Number : (850)617-6883

From:

Account Name : JOHNSON, POPE, BOXOR, RUPPEL & BURNS, ELP.

Account Number : 076666002140 : (727)461-1818 Phone Fax Number : (727)441-8617

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: hmcnatt3@mcnattscleaners.com

LLC REGISTERED AGENT CHANGE GEM CLEANERS BLOOMINGDALE, LLC

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•	(((H2300006	58559 3)))
f p	COVER	LETTER
TO: Registration Section • Division of Corporations		
Gem Cleaners Bloomingdale, LLC SUBJECT:	;	
No.	ame of Limited I	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	ffice Change and	i fee(s) are submitted for filing.
Please return all correspondence concerning t	his matter to the	following:
Christopher R, Dingman, Esquire		
Name of Person		
Johnson Pope Bokor Ruppel & Burns, L.L.P		
Firm/Company		·······
401 E. Jackson Street, Suite 3100		
Address		
Tampa, Florida 33602		
City/State and Zip Code		
hmonatt3@monattscleaners.com		
E-mail address: (to be used for future as	muai report notil	fication)
For further information concerning this matte	r. please call:	
Christopher R. Dingman, Esquire	813	225-2500
Name of Person	w. (Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Mouroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following	ig amount:	
■ \$25 Filing Fee	O 8	555 Filing Fee & Certified Copy
INHS18 (2/14)		

(((H230000685593)))

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 603.0114 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: Gem Cleaners	Bloomingda	le, LLC	
2 (a)		(1:	o)	
Z. (=,	Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)		M	ailing address of limited liability company: (Note: MAY BE POST OF FICE BOX)
	6210 N Florida Avenue		6210 North	Florida Avenue
	Tamps, FL 33604		Tampa Fi	
	05:22:2017		1.1700011182	25
3.	Date of filing/registration in Florida	-1.	í	Document number
5 (a)				
•,•• <i>)</i>	Registered Agent and Registered Office shown on the records of CA Companyion System	of the Florida	Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREE	TADDRESS	2	
	1200 South Pine Island Road			
	Plantation			2023 FEB
				ب ج ب
(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office ad	dress.	ົ່ ໝໍ : ເ > →
	Effective of Libert Assessment Assessment of Libert Assessment	33 8 1111 111	M.C.	2
	Chestnut Business Services, LLC			1LLU 322 PH12:
	NEW Registered Office Address.		·	9H 12: 09
	911 Chestnut Street			09
	Cjearwater	33756 FL		
change agent v was/we the arti	imited liability company is not organized under the lear changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members icles of organization or the operating agreement of the	aws of the ne registere liability co s of the lim ne limited I	State of Flored office and mpany, it is ited liability company, it is ited liability to make the state of the	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in many. It.
	ture of a mentoer or authorized representative of a member			Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and a fons of all statutes relative to the proper and complet ligations of my position as registered agent as provide ely reflect a change in the registered office uddress. If in writing of this change.	gree to act le performa led for in C I hereby co	in this capac ince of my di Thapter 605, onfirm that th	city. I further agree to comply with the utes, and I am familiar with and accept F.S. Or, if this document is being filed to limited liability company has been
Signatu	Least Registered Agent			
	ţ.			

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