L180000 62136

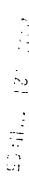
(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Name)
(Document Number)
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04/21/20--01011--023 **25.00



T GLASS

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: GULF COAST GROUP Name of Limited Lie	PROPERTIES LLC ability Company # L 18000 62136
Dear Sir or Madam:	+1218000002136
The enclosed Registered Agent/Registered Office Change and t	fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the f	ollowing:
Name of Person	
GULF CEAST GROUP PROMERTIES, LA	4C
514 COLONIA LANE EAST Address	
Nokomis, FL 34275 City/State and Zip Code	<u> </u>
Ruth (D. Sunshine Venice. Com E-mail address: (to be used for future annual report notific	cation)
For further information concerning this matter, please call:	
Name of Person at (941	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. Monroe Street, Suite 810 Tallahassee, FL 32303

☐ \$55 Filing Fee & Certified Copy

Enclosed is a check for the following amount:

\$25 Filing Fee

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.

I. Na	me of the limited liability company: GULF COAST GRO	us Properties LLC
	The American	
2. (a) .	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Noromy, FL 34275	
	-11	2.1
3.	$\frac{3/9/20/8}{\text{Date of filing/registration in Florida}} \qquad \frac{2/8}{4}$	Document number
		Document number
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State	- e:
	229 PENSACOLA RD	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	-
	VENICE .FL 34285	- -
(b)	RUTH FLUERY	5.5
٠, ,	Enter name of NEW Registered Agent and/or NEW Registered Office address:	-
	514 COLONIA LANE EAST	3
	NEW Registered Office Address:	2
		-
	Nokomis FL 34275	<u>.</u>
change agent w was/wei the artic	mited liability company is not organized under the laws of the State of Floor changes are made, the Florida street address of the registered office and fill be identical. Or, in the case of a Florida limited liability company, it is re authorized by an affirmative vote of the members of the limited liability cles of organization or the operating agreement of the limited liability com	I the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in upany.
Signati	June of a member or authorized appresentative of a ghember	Printed or typed name of signee
I hereb provision the oblination	y accept the appointment as registered agent and agree to act in this capains of all statutes relative to the proper and complete performance of my agations of my position as registered agent as provided for in Chapter 605 by reflect a change in the registered office address, I hereby confirm that the in writing of this change.	icity. I further agree to comply with the

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