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LLC REGISTERED AGENT CHANGE GAMA PAINTING, LLC

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T. LEMIEUX

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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. N	ame of the limited liability company: GAMA PAINTI	NG, LLC	•				
2. (a)	471 S Flagler Ave Unit 78, Pompano Beach, FL 33060	((b) 522 Trace Cir. Apt 201, Deerfield Beach FL 33441				
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	······································	·)	=	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
							
_	06/27/2018		L1800	0157094			
3.	Date of filing/registration in Florida	4.		Document number	•		
5. (a)	Rodrigo Gama De Oliveira						
	Registered Agent and Registered Office shown on the records o	of State:					
				. 4,	ې		
	Registered Office Address (MUST BE FLORIDA STREET		=				
	522 Trace Cir. Apt 201				••		
	Deerfield Beach	33441			ı		
	, F	L			¢		
21.5	Hubco Registered Agent Services, Inc.				-1-		
(b)		Enter name of NEW Registered Agent and/or NEW Registered Office address:					
		<u> </u>	(4) (53)		(1) (1)		
	155 Office Plaza Drive, 1st Floor						
	NEW Registered Office Address:						
							
	Tallahassee,	L_32301					
change agent v was/wa	imited liability company is not organized under the la c or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li cre authorized by an affirmative vote of the members icles of organization or the operating agreement of the	e register lability co of the lin	ed offic ompany nited lia	ce and the business office, it is hereby confirmed ability company or as officed.	e of the registered that the change(s)		
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee			
provisi the oblicomerci no fied	hy accept the appointment as registered agent and agions 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 d in writing of this charge	ree to ac performed for in hereby c	t in this ance of Chapter onfirm i	capacity. I further agre my duties, and I am fan 605, F.S. Or, if this do that the limited liability	ee to comply with the niliar with and accept cument is being filed company has been		
Signatu	re of Registered Agent						