## 

(Requestor's Name)					
(Address)					
(Address)					
(radices)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Dunings Entity Name)					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





08/09/21--01038--004 \*\*55.00





## **COVER LETTER**

INHS18 (2/14)

TO:	Registration Section Division of Corporations		•		
SUBJI	GCC CAPITAL INVESTMENT, LL	С			
	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered Offi	ce Change ar	nd fee(s) are submitted for filing.		
Please	return all correspondence concerning thi	s matter to th	e following:		
Giusep	pe Cumano				
	Name of Person		<del></del>		
GCC C	apital Investment, LLC				
	Firm/Company				
1421 S	W 1st Way				
	Address		<del></del>		
Deerfie	eld Beach, FL 33441				
	City/State and Zip Code		<del></del>		
gjautog	group@gmail.com				
E	-mail address: (to be used for future ann	ual report not	iification)		
For fu	ther information concerning this matter,	please call:			
Giusep	ре Ситапо	484 at (	340-9344		
	Name of Person	ar (	Area Code & Daytime Telephone Number		
	Mailing Address:		Street Address:		
	Registration Section		Registration Section		
	Division of Corporations		Division of Corporations		
	P.O. Box 6327		The Centre of Tallahassee		
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
	Enclosed is a check for the following	amount:			
	□ \$25 Filing Fcc		\$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 Florida.

J. Na	ame of the limited liability company: GCC CAPITAL I	INVESTMENT , L	LC		
2. (a)	1421 SW 1st Way		SW 1st Way		
2. (a)	Principal office address of limited liability company:  (Note: MUST RE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	1421 SW 1st Way	1421 S	W 1st Way		
	Deerfield Beach, FL 33441	Deerfie	Deerfield Beach, FL 33441		
	10/31/2018	L18000255782			
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Rose, Peter A		<b>202</b>		
(b)	Registered Agent and Registered Office shown on the records of				
	Rose, Peter A				
	Registered Office Address (MUST BE FLORIDA STREET	— SASSE			
	1877 S Federal Hwy #100				
	Boca Raton FI	33432	—		
	Giuseppe Cumano		<del></del>		
	Enter name of NEW Registered Agent and/or NEW Registered				
	Giuseppe Cumano				
	NEW Registered Office Address:		<u> </u>		
	1421 SW 1st Way				
	Deerfield Beach , FL	33441			
change agent v was/we the arti- Signa  I here provisithe oblito mere	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lie cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the true of a member or authorized representative of a member obvous of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I id in writing of this change.	registered office ability company, of the limited liab limited liability of Giuseppe Cur ree to act in this of performance of r	and the business office of the registered it is hereby confirmed that the change(s) will be company or as otherwise provided in company.  Printed or typed name of signce trapacity. I further agree to comply with the my duties, and I am familiar with and accept		

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