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O GIMMONS DEC 26 2018

COVER LETTER

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TO: Registration Section Division of Corporations						
SUBJECT: Virind Gupta Equipment, LLC Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Virind Gupta						
Name of Person						
Firm/Company						
4531 Mcintosh Lane						
Address						
Sarasota, FL 34232						
City/State and Zip Code						
virindgupta@gmail.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Bryanna Jepsen at (800) 375-2453						
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS:						
Registration Section Registration Section						
Division of Corporations Division of Corporations						
Clifton Building P.O. Box 6327						
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
□ \$55 Filing Fee & Certified Copy						
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.

1. N	ame of the limited liability company: Virind Gupta			<u> </u>
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(¹	o)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	44/00/0040			77002
2	11/30/2018 Date of filing/registration in Florida	- 4.	L180002	Document number
3.	Date of Hingregistration in Fronda	• •		, , , , , , , , , , , , , , , , , , ,
5. (a)	Registered Agent and Registered Office shown on the records of GUPTA, VIRIND	the Florid	a Dept. of St	ate:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRES	<u>S)</u>	_
	4531 MCINTOSH LANE			<u> </u>
	SARASOTA, FL	342	32	
				· · ·
(b)	Virind Gupta	Office	lden.	_
	Enter name of NEW Registered Agent and/or NEW Registered	onice at	<u>iaress</u> .	· .
				- : 38 - : 38
	NEW Registered Office Address:			
	4541 Bee Ridge Rd.			-
		0.40	200	
	Sarasota , FI	342	<u> 233 </u>	
the chagent	limited liability company is not organized under the la nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the reg iability o of the lii	istered offi company, it nited liabil	ice and the business office of the registere t is hereby confirmed that the change(s) lity company or as otherwise provided in
Vi	nature of a member or authorized representative of a member	Vii	rind Gupt	Printed or typed name of signee
I her provi the ob to me notifi	eature of a member of authorized representative of a member eby accept the appointment as registered agent and ages sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ged in writing of this change. Lure of Registered Agent	ree to ac performed for in hereby	ct in this co nance of m Chapter 6 confirm the	angeity. I further garge to comply with the