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(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status					
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COVER LETTER

TO:	Registration Section Division of Corporations	-		
SUBJ	GRM Construction/Consulting	"LLC"		
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		of Limited Li	ted Liability Company	
Dear S	Sir or Madam:			
The er	nclosed Registered Agent/Registered Office	Change and	fee(s) are submitted for filing.	
Please	return all correspondence concerning this r	natter to the	following:	
Guy	P Morfesi			
	Name of Person		_	
GRM	Construction/Consulting "LLC"			
	Firm/Company			
3157	2 Fairhill Drive			
	Address		_	
West	ley Chapel, FL 33543			
	City/State and Zip Code		-	
grmo	onstructionconsulting2244@gmail.cc	om- CRI	Mccasulting2244 ogmail.com	
1	E-mail address: (to be used for future annual	l report notifi	ication)	
	rther information concerning this matter, pla			
Guy I	Morfesi	404 at (520-6222	
	Name of Person	\ <u></u>	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building	Reş Div	AHLING ADDRESS: gistration Section vision of Corporations D. Box 6327	
	2661 Executive Center Circle Tallahassee, Florida 32301	Tal	lahassee, Florida 32314	
	Enclosed is a check for the following an	nount:		
	☑ \$25 Filing Fee	□ \$5	5 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. Na	me of the limited liability company: GRM Const	truction/Consultir	ng "LLC"		
	Guido P Morfesi	(b)			
(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	31572 Fairhill Drive				
	Wesley Chapel, FL 33543				
	1/24/2019	L19000	0025300		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	Michelle Morfesi				
(b)	Registered Agent and Registered Office shown on the records of	State:			
	Registered Office Address (MUST BE FLORIDA STREE 31572 Farhill Drive				
	Wesley Chapel	33543	of State:		
	Guy P Morfesi Enter name of NEW Registered Agent and/or NEW Register	ed Office address:			
	NEW Registered Office Address:				
		FL			
the cha agent w was/we	mited liability company is not organized under the large or changes are made, the Florida street address fill be identical. Or, in the case of a Florida limited re authorized by an affirmative vote of the members cles of premization or the operating agreement of the second street of the members of the premization of the operating agreement of the second sec	of the registered off liability company, is of the limited liabi he limited liability c	Tice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company.		
CIRTUR	are of a member or authorized representative of a member	Guy P Mor	Printed or typed name of signee		
I hereh provision the oblition to mere notifica	oy accept the appointment as registered agent and a cons of all statutes relative to the proper and completigations of my position as registered agent as providive reflect a change in the registered office address. The writing of this change.	gree to act in this c ie performance of n ded for in Chapter (I hereby confirm th	apacity. I further agree to comply with the		

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