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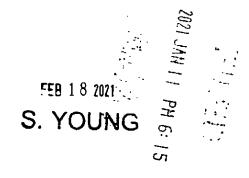
(Requestor's Name)					
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* COVER LETTER

Division of Corporations	• •		
GOARCH HOLDINGS, LLC SUBJECT:			
	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Ch	hange and fee(s) are submitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
LILLIAN GONZALEZ			
Name of Person			
GOARCH HOLDINGS, LLC			
Firm/Company			
1824 RICHARD LANE			
Address			
PALM SPRINGS, FL 33-406			
City/State and Zip Code			
goarch@yahoo.com			
E-mail address: (to be used for future annual re	port notification)		
For further information concerning this matter, pleas	e call:		
LILLIAN GONZALEZ	561 294-6929		
Name of Person	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		
Enclosed is a check for the following amou	ant:		
■ \$25 Filing Fee	□ \$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. 1	Name of the limited liability company: GOARCH HOL	DINGS.	LLC				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)	ailing address of lim			
	1824 RICHARD LANE		1824 RICHA	ARD LANE		·-··	- -
	PALM CITY, FLORIDA 33406		PALM CITY	, FLORIDA 3340	6 		
	DECEMBER 12, 2019		L1900030326	6			
3.	Date of filing/registration in Florida	4.		Ocument numbe	r		
5. (Registered Agent and Registered Office shown on the records of LILLIAN GONZALEZ Registered Office Address (MUST BE FLORIDA STREE) 1824 RICHARD LANE						
(b	PALM CITY					2021 JAN 1	٠,
	Enter name of NEW Registered Agent and/or NEW Register VARCA LAW, PLLC - CHRISTOPHER A. VARCA	ed Office	address:		, e*	i PM 6:	
	NEW Registered Office Address: 280 WEST HILLSBORO BOULEVARD				,	5	
	DEERFIELD BEACH, F	-L_33441					
changagent was/the at	e limited liability company is not organized under the lige or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the mature of a member or authorized representative of a member reby accept the appointment as registered agent and as isions of all statutes relative to the proper and complete bligations of my position as registered agent as provided by reflect a change in the registered office address, and in writing of the change.	aws of the register liability of the limited	ce State of Floriered office and company, it is hunited liability comp	the business officereby confirmed company or as of any.	ce of the signer that the cherwise p	egistere change(: provided	d s) in
_	trely reflect a change in the registered office address, led in writing of this diange. How of Registered Agont OHRISTOPHEL VALLA, VALU			e limited liability	company	has bei	inea en
	Division of Corporations • P.O	,		ee, FL 32314			

FILING FEE: \$25.00