L200000 39164

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C Kiuzea

COVER LETTER

TO: Registration Section Division of Corporations						
G&F GLOBAL SOLUTION, LLC SUBJECT:						
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Cl	hange and fee(s) are submitted for filing.					
Please return all correspondence concerning this mat	tter to the following:					
JOSE A GONZALEZ						
Name of Person						
G&F GLOBAL SOLUTION, LLC						
Firm/Company						
2801 RIVERSIDE DR APT #302						
Address	· ·					
CORAL SPRINGS, FL 33065						
City/State and Zip Code						
AURY1228@YAHOO.COM						
E-mail address: (to be used for future annual re	port notification)					
For further information concerning this matter, please	e call:					
JOSE A GONZALEZ	786 305-9875					
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	int:					
⊠ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					
INFIS18 (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: G& F SOLUTION	N. LLC				
2. (a)	<u></u>	(1)	h)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	2801 RIVERSIDE DR APT# 302				<u></u> ,	
	CORAL SPRINGS, FL 33065					
	02/10/2020		L20000039	164		
3.	Date of filing/registration in Florida	4.	<u> </u>	Document number		
5. (a)						
	Registered Agent and Registered Office shown on the records of JOSE A GONZALEZ	the Florida	Dept. of Stat	te:		
	Registered Office Address (MUST BE FLORIDA STREET)	S)		202		
	2801 RIVERSIDE DR APT# 302		-	. <u></u>	. A	
	CORAL SPRINGS. , FL	33065		ALLAHASSELE	F	
(b)	Enter name of NEW Registered Agent and/or NEW Registered		-		PH 3: 5(
	rante name of NEW Registered Agent and/or NEW Registered	Office ad	<u>dress</u> :	_ : -:	50	
,	LAURA M OLIVARES					
	NEW Registered Office Address:	_		_		
	2801 RIVERSIDE DR APT# 302			_		
	COD AL CODINGS			-		
	CORAL SPRINGS, FL	.: 		_		
thange agent v was/ y/	imited liability company is not organized under the law or changes are made, the Florida street address of the yill be identical. Or, in the case of a Florida limited lia cre authorized by an affirmative vote of the members of des of organization or the operating agreement of the law.	registere bility co f the lim limited li	d office and mpany, it is ited liability iability con	d the business office of s hereby confirmed tha y company or as other apany.	f the registered t the change(s)	
Simp	14.	JOSI	E A GONZA 			
l here provisi he obl o mer	ture of a member or authorized representative of a member by scrept the appointment as registered agent and agre is of all standes relative to the proper and complete to lightons of put Position as registered agent as provided by reflect a change in the registered office address. I h by writing of this change	ce to act performa I för in C ereby co	in this capa nee of my 6 hapter 605 nfirm that t	Printed or typed name of sacity. I further agree to duties, and I am familio, F.S. Or, if this documented limited liability con	- nominitional distriction	
Signatu	re of Registered Agent					