Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000358390 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number: I20090000081

: (307)200-2803

Fax Number

: (813)436-5206

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LLC REGISTERED AGENT CHANGE GC WINDSOR LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help OCT 1 2 2023 10/12/2023 12:15:46 PDT. To: 18506176383 Page 2/2 From: Registered Agents Inc Fax: 8134365206

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the progression of perfects 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	ame of the limited liability company:		
2. (a)	, , , , , , , , , , , , , , , , , , ,	(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)
	08/10/20		00242223
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Meehle, Suzanne D, Esq.		
{b}	Registered Agent and Registered Office shown on the records of Registered Office Address	-	, of State
	1215 E Concord Street		
	Orlando . F1	32803	20
	Northwest Registered Agent LLC		2023 OCT 12
	7901 4th St N		
	NEW Registered Office Address		ិក្ស ហ៊្
	STE 300		
	St. Petersburg FI	33702	
the chagent was/w the art	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the registered lability compa of the limited	d office and the business office of the registered my, it is hereby confirmed that the change(s) Hability company or as otherwise provided in ity company.
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
I here provis the ob to mer notifie	thy accept the appointment as registered agent and aginous 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. It is writing of this change. Taylor Newman - Assistant S	ree to act in the performance of for in Chap hereby confirmations.	his carracity. I further surge to comply with the
Signati	ire of Registered Agent		