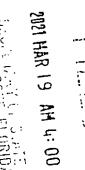
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(Requestor's Name)				
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:			



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COVER LETTER

Division of Corporations	
GRACIE MID, L.L.C. SUBJECT:	
	nited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Chang	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
SUSAN L. ADINAMIS	
Name of Person	
ADINAMIS & SAUNDERS, P.C.	
Firm/Company	
250 E. 96th ST. SUITE 150	
Address	
INDIANAPOLIS, IN 46240	
City/State and Zip Code	_
DEB@ADINAMIS.COM	
E-mail address: (to be used for future annual repor	t notification)
For further information concerning this matter, please ca	all:
DEB GARDNER 31 at (
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 amount:	:
■ \$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.

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 BON)		
	500 25TH AVENUE		P O-BOX	(60745 500 - 25 Hy Ave No
	ST. PETERSBURG, FL 33704	-		ERSBURG, FL 33704
	08/25/2020		L2000026	54113
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Registered Agent and Registered Office shown on the records of t			<u> </u>
	Registered Agent and Registered Office shown on the records of t GASSMAN, ALAN S	he Florie	da Dept. of S	tate:
	Registered Office Address (MUST BE FLORIDA STREET A	nner	7C1	
	1245 COURT STREET	IDDAKE	<u>137</u>	2021
	CLEARWATER, FL	33756		2021 MAR 19
(1.)				F11.5
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:	
	ABBOTT, NORMA P.			AM 4: 00
	NEW Registered Office Address:			_ > 0
	500 25TH AVENUE			
	ST. PETERSBURG, FL	33704		
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law.	registe bility c f the lii limited	red office a company, it mited liabi	and the business office of the registered t is hereby confirmed that the change(s) lity company or as otherwise provided in ompany.
provisi the obl to mer	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change,	ee to ac perform I for in ereby c	et in this co nance of m Chapter 6 confirm tho	spacity. I further agree to comply with the y duties, and I am familiar with and accept 05, F.S. Or. if this document is being filed at the limited liability company has been

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

Signature of Registered Agent



A Professional Corporation
ATTORNEYS AT LAW

Carol M. Adinamis. JD CPA Susan L. Adinamis, * JD Jeffrey A. Saunders, + JD CPA Rachael R. Taylor, JD

* Also licensed in Florida

+ Also licensed in Pennsylvania

250 E. 96th Street Suite 150 Indianapolis, IN 46240

(317) 218-2600 (317) 218-2601 Fax

March 15, 2021

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

To whom it may concern:

Enclosed are the Statement of Change of Registered Office or Registered Agent or Both for a Limited Liability Company for:

GRACIE NORTH, L.L.C. GRACIE SOUTH, L.L.C. GRACIE MID, L.L.C. GRACIE WAREHOUSE, L.L.C.

along with a check for \$100.00 for the filing fee.

Thank you for your assistance.

Sincerely. July J Odhram

Susan L. Adinamis

SLA/dg Enclosures