## 121000071821

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FM 12: 40	DIVISION OF COST CHAPTER

• •	ŧ	* GOVER L	ETTER
TO: Registration Division of	Section Corporations		
GTP B SUBJECT:	RANDS LLC		
	Nan	ne of Limited Li	ability Company
Dear Sir or Madam:			
The enclosed Regist	ered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.
Please return all corr	respondence concerning thi	s matter to the f	following:
NATALIYA GONCH	AROVA		
	Name of Person		<del></del> -
GTP BRANDS LLC			
	Firm/Company	<del></del>	<del>-</del>
8450 NW 68TH STRE	EET UNIT#1		
	Address		
MIAMI, FL 33166			
	City/State and Zip Code		<del></del>
gtp.brands@gmail.com	n		
E-mail address	: (to be used for future annu	ual report notific	<del>ca</del> tion)
For further informati	on concerning this matter.	please call:	
NATALIYA GONCH	AROVA	954 at (	239-2292
Nan	ne of Person		Area Code & Daytime Telephone Number
Mailing Ad Registration Division of P.O. Box 61 Tallahassee	n Section Corporations 327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

□ \$55 Filing Fee & Certified Copy

**■** \$25 Filing Fee

Enclosed is a check for the following amount:

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## 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	fame of the limited liability company: GTP BRANDS	S LLC				
2. (a)	GTP BRANDS LLC	_	(b)	GTP BR	RANDS LLC	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)	-
	8450 NW 68TH STREET UNIT #1			8450 NV	W 68TH STREET UNIT #1	
	MIAMI, FL 33166			MIAMI.	I. FL 33166	
	02/11/2021		I.	.2100007	71821	
3.	Date of filing/registration in Florida	4.	-		Document number	
5. (a)						
<i>-</i> ()	Registered Agent and Registered Office shown on the records ANDREY GENSAR	of the Flor	rida I	Dept. of St	State:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u></u>		
	12820 82ND LN N				VISI	
	WEST PALM BEACH	FL_33412	?		2023 Sept. S. P.M.15: 170	•
					<u>~</u>	
(h)			_			
	Enter name of NEW Registered Agent and/or NEW Register	red Office	addı	<u>ress</u> :	2: A	•
	NATALIYA GONCHAROVA				<b>o</b> *	
	NEW Registered Office Address:			_	<del>_</del>	
	8450 NW 68TH STREET UNIT #1					
	МІАМІ	FL <sup>33166</sup>	ı			
If the l	imited liability company is not organized under the Is or changes are made, the Florida street address of the	laws of th	he S	tate of F	Florida, it is hereby confirmed that after	er the
was/w	will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	Hability i 's of the li	com imit	pany, it ed liabili	t is hereby confirmed that the change(s lity company or as otherwise provided	e )
	- Selle	N.	АТА	LIYA G	GONCHAROVA	
	ture of a member or authorized representative of a member		_		Printed or typed name of signee	
to mere notified	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet igations of my position as registered agent as provia ely reflect a change in the registered office address, a I in writing of this change.	gree to a te perfori led for in I hereby	ict in man i Ch con,	i this cap ce of my apter 60 firm that	ipacity. I further agree to comply with y duties, and I am familiar with and ac 05, F.S. Or, if this document is being j it the limited liability company has bed	the cept filed n
<u>-</u>	4. GENSAL					
ារខ្មីរាជព្រ	re of Registered Agent					