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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone

: (307)200-2803

Fax Number

: (813)436-5206

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LLC REGISTERED AGENT CHANGE GTB PROPERTIES, LLC

Certificate of Status	0
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M. SOLOMON

NOV 1 4 2024

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: GTB PRO	DPE	RTIES	, LLC
2. (a)	, , ,	(1	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)
	7901 4th St N STE 300		7901 4	Ith St N STE 300
	St. Petersburg, FL 33702	_	St. Pete	ersburg, FL 33702
	02/16/22		L2200	00063773
3.	Date of filing/registration in Florida	4,		Document number
5. (a)	CORPORATION SERVICE COMPAN	Υ		
<i>5</i> , (a,	Registered Agent and Registered Office shown on the records of t		a Dept. of Stat	e:
	1201 HAYS STREET			-
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES:	<u>s)</u>	2024 A Section SAL
	TALLAHASSEE FL_	3230:	1	2024 NOV 1 4 2024 NOV 1 4
(b)	Northwest Registered Agent L	LC		
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	ldress:	
	7901 4th St N			m ω
	NEW Registered Office Address			_
	STE 300			_
	St. Petersburg , FL	33702	2	_
the chagent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of 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 limited liability.	the regi bility co f the lin limited	stered office ompany, it i nited liabilit	e and the business office of the register is hereby confirmed that the change(s) by company or as otherwise provided in
Sign	Marie of a member or authorized representative of a member	ING		Printed or typed name of signee
I here provis the ob 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	t in this cap lance of my Chapter 603 onfirm that	• •

Signature of Registered Agent

- Assistant Secretary

Taylor Newman