## 122000M1544

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## **COVER LETTER**

TO:	Registration Section Division of Corporations								
SUBJ	GMR COASTAL LLC								
Name of Limited Liability Company									
Dear S	Sir or Madam:								
The er	nclosed Registered Agent/Registered C	Office Change and	fee(s) are submitted for filing.						
Please	return all correspondence concerning	this matter to the	following:						
Susan	Rushing								
	Name of Person		<del></del>						
Rushir	ng Law Firm, PLLC								
	Firm/Company		<del></del>						
3124 V	Vest County Highway 30A								
	Address		<del></del>						
Santa	Rosa Beach, FL 32459								
	City/State and Zip Code		<del></del>						
susan@	Prushinglaw30a.com								
I	E-mail address: (to be used for future a	nnual report notif	ication)						
For fu	rther information concerning this matt	er, please call:							
Susan	Rushing	850 at (	534-0123						
	Name of Person		Area Code & Daytime Telephone Number						
	Mailing Address:		Street Address:						
	Registration Section		Registration Section						
	Division of Corporations		Division of Corporations						
	P.O. Box 6327		The Centre of Tallahassee						
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810						
			Tallahassee, FL 32303						
	Enclosed is a check for the following	ng amount:							
	■ \$25 Filing Fee	□ \$:	55 Filing Fee & Certified Copy						

## 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.

Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  INLET BEACH, FL 32461  03/22/2022  Date of filing/registration in Florida  Rushing Law Firm, PLLC  Registered Agent and Registered Office shown on the records of the street Address  Registered Office Address  (MUST BE FLORIDA STREET ADDRESS)	- 4.	I.2200	( <u>Ne</u> SHVILLE, 1 00141544 Doc	ote: MAY B	BE POST (	iability company:  OFFICE BOX)	
Date of filing/registration in Florida  Rushing Law Firm, PLLC  Registered Agent and Registered Office shown on the records of the Registered Office Address  Registered Office Address	he Flori	I.2200	0141544 Doc				
Date of filing/registration in Florida  Rushing Law Firm, PLLC  Registered Agent and Registered Office shown on the records of the Registered Office Address  Registered Office Address  (MUST BE FLORIDA STREET A	he Flori	da Dept. c	Doc	ument nu	mber		
Rushing Law Firm, PLLC  Registered Agent and Registered Office shown on the records of tale Registered Office Address  Registered Office Address  (MUST BE FLORIDA STREET A	he Flori	•		ument nu	mber		
Registered Agent and Registered Office shown on the records of t  Registered Office Address (MUST BE FLORIDA STREET A		•	of State:				
Registered Office Address (MUST BE FLORIDA STREET A		•	of State:				
	1DDRE.	<u>SS)</u>					
1394 COUNTY HIGHWAY 283 S. BLDG. 1							
Santa Rosa Beach, FL_	32459					F11	
))					15.55 17	= =	
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddress:	<del>_</del>		77.4 77.01	77	
					77	5:  -	
NEW Registered Office Address:			<del></del>		1.	•	
3124 West County Highway 30A	•						
Santa Rosa Beach , FL	32459						
e limited liability company is not organized under the law ge or changes are made, the Florida street address of the t will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members o rticles of organization or the operating agreement of the	registe bility of f the li	red offic company mited lia	ce and the v. it is here ability cor	business eby confir npany or a	office of rmed that	the registered the change(s)	
nature of a member or authorized representative of a member			Prin	Printed or typed name of signee			
reby accept the appointment as registered agent and agre isions of all statutes relative to the proper and complete p bligations of my position as registered agent as provided erely reflect a change in the registered office address. I h led in writing of this change	ee to ac perform I for in ereby c	ct in this nance of Chapter confirm	s capacity f my dutie r 605, F.S that the li	. I further s, and I an l. Or, if th imited liab	r agree to m familia iis docun bility con	o comply with the or with and acception is being file opent is being file openy has been	

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

INHS18 (2/14)