## Florida Department of State

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.

(((H23000206291 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

Phone : (307)200-2803 Fax Number : (855)330-1010

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

Email	Address:			
EMBT	MUUI ESS.			

## LLC REGISTERED AGENT CHANGE **GREEK 2 GO LLC**

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

Electronic Filing Menu Corporate Filing Menu

Help

0 8 2023

## 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.	Ni	nne of the limited liability company: GREEK 2 GC	LLC					
2.	(a)	Principal office address of limited liability company:	_ (	b)	Mailing address of limited Iiab	ility com	nany:	
		(Note: MUST BE STREET ADDRESS)		·	(Note: MAY BE POST OF			
		08/24/2022	_	L220003	71928			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	Aravantinos, Stephen-Spiros			_			
	` ,		Registered Agent and Registered Office shown on the records of the Florida Dept. of State					
		8461 Heritage Green Way						
		Registered Office Address (MUST BE FLORIDA STREET A	ADDRES.	<u>s)</u>	-			
					_			
		Bradenton , FL	34212	2	-			
	(b)	Northwest Registered Agent LLC						
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			idress:	-	2023 JUH		
						ji ji		
		7901 4th St N			_	73.7		
		NEW Registered Office Address:				7		
		STE 300		····-	-	PH	*	
						∵. ∵.		
		St. Petersburg , FL	33702	) -	_	ထ		
the ag wa	e cha ent v is/wo	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reginality confident of the linding the limited	istered office ompany, it is nited liability liability con	e and the business office is hereby confirmed that t y company or as otherwis	of the r he chan	egistered ige(s)	
+	<u>//</u> Signa	ture of a member or authorized representative of a member	<u>ıva</u>	t Smith	Printed or typed name of sign	1 <del>00</del>	<del> </del>	
I i pro the to	herei ovisi 2 obl mere	by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I fall in writing of this change.	ee to ac perform I for in tereby c	et in this cape nance of my Chapter 605 confirm that	acity. I further garee to	comply	with the nd accept ing filed s been	

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

Taylor Newman - Assistant Secretary

Signature of Registered Agent