

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet
L23000290718

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

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**LLC REGISTERED AGENT CHANGE
LIVLONG PROPERTIES GC LLC**

| | |
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JUN 12 2024

K. Brumbley

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LIVLONG PROPERTIES GC LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gerald Long

Name of Person

LIVLONG PROPERTIES GC LLC

Firm/Company

5866 NW 25TH COURT

Address

BOCA RATON, FL 33496

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SingleFile Technologies Inc. 800 391-9869
Name of Person at () 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.

1. Name of the limited liability company: LIVLONG PROPERTIES GC LLC

| | |
|---|---|
| 2. (a) <u>Principal office address of limited liability company:</u> <u>(Note: MUST BE STREET ADDRESS)</u> <u>5866 NW 25TH COURT</u> <u>BOCA RATON, FL 33496</u> | (b) <u>Mailing address of limited liability company:</u> <u>(Note: MAY BE POST OFFICE BOX)</u> <u>5866 NW 25TH COURT</u> <u>BOCA RATON, FL 33496</u> |
|---|---|

| | |
|--|---|
| 3. <u>06/15/2023</u> ; Date of filing/registration in Florida | 4. <u>L23000290718</u> Document number |
|--|---|

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

REGISTERED AGENTS INC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

7901 4TH ST N STE 300

St. Petersburg, FL 33702

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

GERALD LONG

NEW Registered Office Address:

5866 NW 25TH COURT

BOCA RATON, FL 33496

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Gerald Long
 Signature of a member or authorized representative of a member

Gerald Long
 Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Gerald Long
 Signature of Registered Agent

2024 JUN 11 PM 2:30