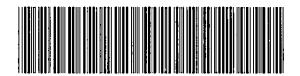
L23000376643

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
J. HORNE					
OCT - 7 2023					

Office Use Only



700415379977

09/11/23--01025--005 **25.00





TO: Registration Section

COVER LETTER

Division of Corporations	
SUBJECT: GATT/	PROPERTIESI, 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:

KAREN BERGAMASCH 1 Firm/Company 1204 SE 3rd ST

Pomparo Beach, FL 33060.
City/State and Zin Code

KBERGCRA@GWAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kasen Bisgamoschi at (786) 210 2159

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

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGEN. LIMITED LIABILITY COMPANY

. BOTH FOR

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. Na	me of the limited liability company: 6ATT		PROF	PERTIESI	<u>/</u>
2. (a)	1204 SE 3rd ST	(w 1204	SE 3rd ST	
(-)	Principal office address of limited liability company:	- '		ailing address of limited liability comp	•
	(Note: MUST BE STREET ADDRESS)		\mathfrak{I}	(Note: MAY BE POST OFFICE BO	<u>)X</u>) —,
	Komfono Beach, FL	-	<u> Pon</u>	npono Beach	-J+C
	<u> </u>	_		33060	
	10 August 2023		_L23C	000376643	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	Marcelo Brosig				
	Registered Agent and Registered Office shown on the records of th	e Florio	da Dept. of State:		
	1204 SE 3rd ST				
	Registered Office Address (MUST BE FLORIDA STREET A)	<u>DDRES</u>	<u>(SS)</u>		
					
	Pompano Beach, FL	3	3060	22 A	
(b)	KAREN BERGAMA	150	_H_1	33 SE	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office a	ddress:	P. 1	
	1204 SE 3rd ST			1	
	NEW Registered Office Address:		_		
				28	
	Pompane Beach, FL	3.	3 <i>060</i>		
change agent w was/we the artic	mited liability company is not organized under the laws or changes are made, the Florida street address of the revill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egiste fility c the lif mited	red office and ompany, it is mited liability liability comp	the business office of the regist hereby confirmed that the chan- company or as otherwise provi- bany.	tered ge(s)
	ure of a member or authorized representative of a member		Karen	Bergomoschi Printed or typed name of signee	
				, , ,	
the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete po igations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	e to ac erforn for in ereby c	ct in this capac nance of my di Chapter 605, confirm that th	city. I further agree to comply wittes, and I am familiar with and F.S. Or, if this document is beine limited liability company has	with the d accept ing filed been

Signature of Registered Agent