

L23000499976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

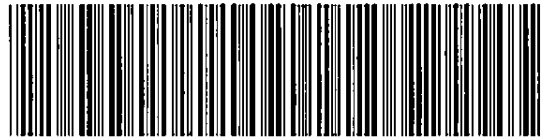
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gratitude Health Group, 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:

Lisa Noell

Name of Person

Bowie & Jensen, LLC

Firm/Company

210 W. Pennsylvania Avenue, Suite 400

Address

Towson, MD 21204

City/State and Zip Code

bruce@gratitudehealthgroup.com

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

For further information concerning this matter, please call:

Lisa Noell

410

583-2400

at ()

Name of Person

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 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: Gratitude Health Group, LLC

2. (a) 1201 6th Avenue W, Suite 419, Bradenton, FL 34205 (b) 1201 6th Avenue W, Suite 419, Bradenton, FL 34205
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3. 09/14/2023 4. 1.23000499976
Date of filing/registration in Florida Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

1201 6th Avenue W, Suite 211

Bradenton, FL 34205

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

NEW Registered Office Address:

1201 6th Avenue W, Suite 419

Bradenton, FL 34205

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.

Bruce Bartoo
Signature of a member or authorized representative of a member

Bruce Bartoo

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.

Bruce Bartoo
Signature of Registered Agent

BOWIE & JENSEN, LLC

ATTORNEYS AT LAW
210 W. PENNSYLVANIA AVENUE, SUITE 400
TOWSON, MARYLAND 21204
[HTTP://WWW.BOWIE-JENSEN.COM/](http://www.bowie-jensen.com/)
INFO@BOWIE-JENSEN.COM
(410) 583-2400
FAX (410) 583-2437

LISA NOELL

NOELL.L@BOWIE-JENSEN.COM

February 20, 2024

VIA USPS First Class mail

Florida Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

RE: Filing

Dear Clerk,

Please find enclosed two change of resident agent addresses for filing. Also, please find enclosed a check for \$50.00 for the processing fees (regular processing).

If you have any questions regarding these filings, please feel free to contact me.

Very truly yours,



Lisa Noell
Paralegal