## 124000106094

(F	Requestor's Name)
	Address)
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(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
_	
(E	Business Entity Name)
1)	Document Number)
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:
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Office Use Only



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LCC RAGRO Change



A. RAMSEY MAR 29 2074



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000195

REFERENCE : 379858 7953932

AUTHORIZATION :

COST LIMIT : \$ 25.700

ORDER DATE: March 27, 2024

ORDER TIME : 4:0 PM

ORDER NO. : 379858-005

CUSTOMER NO: 7953932

## CHANGE OF AGENT

NAME: GCVR, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER:

## 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. Na	ame of the limited liability company: GCVR, LLC			
2. (a)		(	b)	
( )	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		-/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3223 NE 40TH STREET		3223 NE	40TH STREET
	FORT LAUDERDALE, FL 33308		FORT LA	AUDERDALE, FL 33308
	02/29/2024		L2400010	06094
3.	Date of filing/registration in Florida	4.	-	Document number
5. (a)				
,	Registered Agent and Registered Office shown on the records of COTTON, GLENN	the Floric	la Dept. of Sta	
	Registered Office Address (MUST BE FLORIDA STREET			
	3223 NE 40TH STREET			三 三 三
	FORT LAUDERDALE FI	33308		MANAR 28 PM S 56
				rior z
(b)	Enter name of NEW Registered Agent and/or NEW Registered	1000		- <u> </u>
	Enter name of NEW Registered Agent and/or NEW Registered	1 Office a	ddress:	
	Corporation Service Company			
	NEW Registered Office Address:			_
	1201 Hays Street			_
	Tallahassee, F1	32301		_
change agent w was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of the organization or the operating agreement of the	register ability co of the lin	ed office an ompany, it i nited liabilit	Id the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
	enn Cotton	Gle	enn Cotton,	Manager
_	ure of a member or authorized representative of a member			Printed or typed name of signee
I herel provision he obli o mere notifica	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I have been a change in the registered office address, I have been a change.	ee to ac perform d for in t hereby c	t in this cap ance of my Chapter 602 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
	re of Registered Agent  Kirby, Asst. Vice President on behalf of Corporation Service Corporation	npany		

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