

m13000000348

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

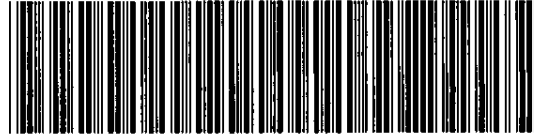
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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DEPT. OF REVENUE  
17 JAN 26 AM 10:36

2017 JAN 26 A 9:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

S Warren

JAN 27 2017

Account#: I20000000088

Date: 01/26/2017

Name: Michelle Walker

Reference #: C017977

ENTITY NAME: GW SERVICES, LLC

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Annual Report
- ☒ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☐ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other: \_\_\_\_\_

RECEIVED  
01-27-2017  
17 JAN 26 AM 10:36

Please return a copy of this cover letter with the evidence. Thanks!

Authorized Amount: \$25

Please call Michelle at 518-213-0737

Signature: Michelle Walker

if authorized amount is incorrect.

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 605.0114, 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: GW SERVICES, LLC

2. (a) Principal office address of limited liability company: 1385 PARK CENTER DRIVE  
(Note: **MUST BE STREET ADDRESS**)

Vista, CA 92081

(b) Mailing address of limited liability company: 1385 PARK CENTER DRIVE  
(Note: **MAY BE POST OFFICE BOX**)

Vista, CA 92081

January 16, 2013

M13000000348

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent:

C T CORPORATION SYSTEM

Registered Office Address:

1200 SOUTH PINE ISLAND ROAD

1200 South Pine Island Road

PLANTATION, FL 33324

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

**NEW Registered Agent:**

National Corporate Research, Ltd., Inc.

**NEW Registered Office Address:**

115 North Calhoun St., Suite 4

**(MUST BE FLORIDA STREET ADDRESS)**

Tallahassee

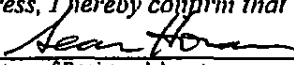
FL 32301

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.

  
Signature of a member or authorized representative of a member

Steven D. Stricker,  
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.*

  
Signature of Registered Agent

Sean Honan, Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

THS18 (12/13)

FILED  
JAN 26 A 4 39  
TALLAHASSEE  
FLORIDA