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(Req	uestor's Name)			
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SECRETARY OF STATE

SEP 10 2013 D EQUCE

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Global Diversified Investment & I	Equity Holding Group (GDIEHG) LLC		
Name of Limite	ed 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 r	natter to the following:		
John Smith			
Name of Person			
Firm/Company	200	ļ	
2450 Maitland Center Parkway, suite 2	SEP - SEP -		
Address	RRY O		
maitland fl 32751	SEP -9 PH 3: 58 CRETARY OF STATE LAHASSEE-FLORID		
City/State and Zip Code			
roni@leroyalusa.com	 		
E-mail address: (to be used for future annual report notifica			
For further information concerning this matter, pl	ease call:		
Roni	407 383-4705		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following an	aount:		
■ \$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 section liability company submits the followagent, or both, in the State of Florida	ons 608.416 or 608.5 ving statement in orde 2.	08, Florida Statutes, t r to change its registe	the undersign ered office or	ied limited registered
1. Name of the limited liability comp	pany: GLOBAL DIVERSIFIED IN	ESTMENT & EQUITY HOLDING GROUP	P (GDIEHG) LLC	
2. (a) Principal office address of lin (Note: MUST BE STREET		2126 E. JEFFERSON STREE ORLANDO, FL 32801	T	
(b) Mailing address of limited lia (Note: MAY BE POST OF		126 E. JEFFERSON STREE ORLANDO, FL 32801	T	
06/06/2013		M13000003583	_	
3. Date of filing/registration in Flori	da	4. Document number		
5. (a) Registered Agent and Register	ered Office shown on	the records of the Flori	da Dept. of S	tate:
Registered Agent:		AARON SHOUF		
Registered Office Address:		126 E. JEFFERSON STREE ORLANDO FL 32801	:т	
(b) Enter name of <u>NEW Registe</u> <u>NEW</u> Registered Agent:	red Agent and/or <u>NE</u>	W Registered Office a	ZEIZ SEP - 9	
NEW Registered Office Add (MUST BE FLORIDA STR		126 E. JEFFERSON STREE		32801
If the limited liability company is no confirmed that after the change or chand the business office of the registe liability company, it is hereby confir the members of the limited liability of the operating agreement of the limited. Signature of a member or authorized representations.	nanges are made, the Fired agent will be identified in the change (see that the change (see that the change) as otherwised liability company.	lorida street address of ical. Or, in the case of	the registered fa Florida lim	d office nited
JOHN SMITH Printed or typed name of signee		_		
I hereby accept the appointment as comply with the provisions of all sta and I am familiar with and accept the Chapter 608, F.S. Or, if this docum address, Lhereby confirm that the line	registered agent and a tutes relative to the pr the obligations of my po ent is being filed to me mited liability compan	igree to act in this cape oper and complete per sition as registered ag rely reflect a change in y has been notified in v	acity. I furthe formance of h ent as provid n the register writing of this	er agree to ny duties, ed for in ed office change.
and I am familiar with and accept the Chapter 608, F.S. Or, if this docum address, I hereby confirm that the line Signature of Registered Agent	ne obligations of my po ent is being filed to me mited liability compan	sition as registered ag rely reflect a change in y has been notified in v	ent as provid n the register writing of this	ed for ed offic chang