## M15 000003242

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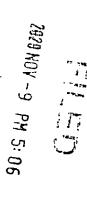
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S. YOUNG



## **COVER LETTER**

TO:	Registration Section Division of Corporations		
	G.T.C. INSTITUTE, LLC		r*
SUBJ	JECT:	Name of Limited L	iability Company
Dear	Sir or Madam:		
The c	inclosed Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Pleas	e return all correspondence concernin	g this matter to the	following:
Charl	es Wilson		
	Name of Person		<del></del>
Immi	x Law Group PC		
	Firm/Company		<del></del>
600 N	NW Naito Pkwy STE G		
<del></del>	Address		<del></del>
Portla	and. OR 97209		
	City/State and Zip Co	de	
CLIE	NTSERVICES@IMMIXLAW.COM		
	E-mail address: (to be used for future	annual report noti	fication)
For fu	urther information concerning this ma	itter, please call:	
Charl	les Wilson	503 at (	802-5539
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address:		Street Address:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	P.O. Box 6327		The Centre of Tallahassee
	Tallahassee. FL 32314		2415 N. Monroe Street, Suite 810
			Tallahassec, FL 32303
	Enclosed is a check for the follow	wing amount:	
	■ \$25 Filing Fee	<u> </u>	555 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.

	ame of the limited liability company:  G.T.C. INSTITUTE, LLC			G.T.C. INS		.C	·	·
?. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(I	b) <sub>-</sub>		Mailing address (Note: MAY	of limited li	-	-
	12338 N 136th Place			12338 N 13	36th Place			
	Scottsdale, AZ 85259	<del></del>	-	Scottsdale,	AZ 85259			
	March 20, 2015		٨	415000003	3242			
3. 5. (a)	Date of filing/registration in Florida WILSON, RICHARD	4.			Document n	umber		
. (4)	Registered Agent and Registered Office shown on the records of 328 CRANDON BLVD., SUITE 225	of the Florid	a D	Dept. of State	<del>.</del> ::		22	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				•		7078 NOV	
	KEY BISCAYNE	L 33149			-		9	
(b)	Janini, Ricardo  Enter name of NEW Registered Agent and/or NEW Register	ad Office of		acc'	-	, · ,	PM 5: 06	
	1111 Crandon Bivd A708	CO CHINE A	<u> 141</u>	<u>C33</u> .			6	
	NEW Registered Office Address:				-			
	Key Biscayne,	FL			-			
change agent v was/w	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	he register liability co s of the lin	ed om nite	office and pany, it is ed liability	d the busines s hereby cont y company o	ss office of firmed that	the reg	gistered ange(s)
Ric	liard Wilson	Ric	har	rd C. Wilso	ın			
Signa	Signature of a member or authorized representative of a member				Printed or typ	ed name of s	ignee	
provis the ob to mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, d'in writing of this change.	gree to ac te perform led for in ( I hereby c	t ir ian Ch con	n this cape ce of my c apter 605 firm that t	acity. I furth luties, and I , F.S. Or. if the limited li	er agree to am familio this docun ability con	o compour with nent is a neavy l	ly with the and accep- being filed as been

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 F1LING FEE: \$25.00

Signature of Registered Agent