(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:							
4							

Office Use Only



800375979138

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT	NO. :	1200000001	195
	REFERE	NCE :	200255	8249717
	AUTHORIZAT	ION : (Louel of	e non
	COST LI	MIT :	\$ 25.00	
			· 	
ORDER DATE :	November 5,	2021		
ORDER TIME :	2:03 PM			
ORDER NO. :	200255-004			
CUSTOMER NO:	8249717			
		-		
	CHANGE (OF AGENT		
NAME :	GRAMERCY F	HOLDINGS	I LLC	

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED 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. 8	lame of the limited liability company: GRAMERCY F	HOLDING:	SILLC				
	·						
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(.	(b) Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO.				
	1111 E AIRLINE HWY	1111 E AIRLINE HWY					
	GRAMERCY, LA 70052						
	12/05/2016		M160000	09683			
3.	Date of filing/registration in Florida	4.		Document	number		
5. (a)							
	Registered Agent and Registered Office shown on the records o C T CORPORATION SYSTEM	of the Florida	Dept. of St	ate;			
	Registered Office Address (MUST BE FLORIDA STREET 1200 SOUTH PINE ISLAND ROAD	T ADDRESS	2	_			
	PLANTATION, F	33324			(;) ([7]	202	
(b)		ed Office add	dress:	_	ALL AND	2021 NOV 15	12 Ag 12 Ag
	Corporation Service Company					70m 7137	ਿ•, • • =ਜ਼ਾ;
	NEW Registered Office Address:	·-	-	_		ج ک	:=·*
	1201 Hays Street				-r	27	
	Tallahassee, Fl	L		_			
change agent v was/we the arti	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lister authorized by an affirmative vote of the members of cless of organization or the operating agreement of the undreas Schmitz	e registere lability con of the limi limited li	d office ar mpany, it i ited liabilit ability cor	nd the busines is hereby con ty company o	ss office o firmed tha or as other	of the re at the c wise p	egistered
				Printed or typ			
the obl to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I din writing of this change.	ree to act i performa ed for in Ci hereby con	in this cap nce of my hapter 60: afirm that			_	ply with the a and accept being filed has been
Signatu	Thace C. Kuble re of Registered Agent	GRACE	E. KIRBY	Y. ASST. VIC	CE PRESI	DENT	-