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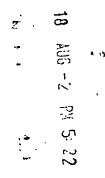
(Req	uestor's Name)			
. (Add	ress)			
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(City	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	iness Entity Nar	me)		
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COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	GMFS LLC		
	Name of L	imited Liability	Company
Dear Sir	or Madam:		
The encl	osed Registered Agent/Registered Office Ch	inge and fee(s) a	are submitted for filing.
Please re	eturn all correspondence concerning this matt	er to the followi	ng:
Jeffrey	Weston		
_	Name of Person		
GMFS	LLC		
	Firm/Company		
7389 F	lorida Blvd, Suite 200A		
	Address		
Baton I	Rouge, La. 70806		
	City/State and Zip Code		
-	n@gmfslending.com		
E-n	mail address: (to be used for future annual re	ort notification)	
For furth	er information concerning this matter, please	call:	
Jeffrey	Weston at (225 21	4-5018
	Name of Person	Area	Code & Daytime Telephone Number
5	STREET/COURIER ADDRESS:	MAILING	GADDRESS:
	Registration Section	Registratio	
	Division of Corporations		f Corporations
	Clifton Building	P.O. Box 6	
	2661 Executive Center Circle	Tallahasse	e, Florida 32314
	Γallahassee, Florida 32301		
1	Enclosed is a check for the following amou	nt:	
ţ	☑ \$25 Filing Fee	□ \$55 Filing	g Fee & Certified Copy

INHS18 (2/14)

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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.

7389 Florida Blvd, Suite 200A	(b) 7	389 Florida Blvo	f, Suite 200A				
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:			_ ` '		
Baton Rouge, La 70806	В	aton Rouge, La.					
04/15/1999	M	99000000559					
Date of filing/registration in Florida	4.	Document	number				
Paracorp, Inc							
Registered Agent and Registered Office shown on the rec	cords of the Florida De	pt. of State:					
Registered Office Address (MUST BE FLORIDA ST	TREET ADDRESS)		·				
			305				
	, Fl.						
			~				
Enter name of NEW Registered Agent and/or NEW Re			¢ σι				
Enter name of NEW Registered Agent and/or NEW Re	gistered Office addres	<u>.×</u> :					
Paracorp, Inc			ယ				
NEW Registered Office Address:							
155 Office Plaza Dr							
Tallahassee	, FL 32301						
mited liability company is not organized under nge or changes are made, the Florida street add vill be identical. Or in the case of a Florida lin	lress of the register	ed office and the bu	isiness office of the regis				
re authorized by a saturnyative vote of the mer cles of organization or the operating agreement	nbers of the limited	d liability company	or as otherwise provided				
7.31.18	Jeffre	/ vveston					

Signature of Registered Agent