

N05000004174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

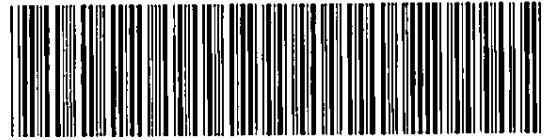
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600399481246

PA & RO Change

2023 FEB -9 AM 11:18

FILED

TALLAHASSEE, FLOR.

2023 FEB -9 AM 10:02

RECEIVED

A. RAMSEY
FEB 10 2023

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 02/09/2023

****WALK IN****

ENTITY NAME GANG ALTERNATIVE, INC.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 35

ACCOUNT # 120140000108
United Corporate
Services, Inc.

Keith Sheppard

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: GANG ALTERNATIVE, INC.
Name of Corporation

DOCUMENT NUMBER: N05000004174

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Nozile

Name of Contact Person

Firm/Company

12000 BISCAYNE BOULEVARD, SUITE 402

Address

MIAMI, FL, 33181

City/State and Zip Code

registeredagent@unitedcorporate.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Nozile

Name of Contact Person

at (954

) 360-8834

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: GANG ALTERNATIVE, INC.
2. The principal office address: 12000 Biscayne Blvd. Suite 402, MIAMI, FL 33181
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 04/18/2005 Document number: N05000004174
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Michael Nozile

12000 BISCAYNE BOULEVARD

SUITE 402, MIAMI, FL, 33181

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

United Corporate Services, Inc.


3458 Lakeshore Drive, County of Leon

P.O. Box NOT acceptable

Tallahassee, Florida 32312

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

Michael Nozile

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Michael A. Barr

Signature of Registered Agent

February 2, 2023

Date

If signing on behalf of an entity:

Michael A. Barr

Typed or Printed Name

***** FILING FEE: \$35.00 *****

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)

2023 FEB -9 AM 11:18

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