

Division of Corporations

Page 1 of 2

**PO3000092451**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H14000218869 3)))



H140002188693ABC6

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : DESPACHANTE BRASILEIRO  
Account Number : I20020000075  
Phone : (954) 786-7180  
Fax Number : (954) 786-8250

FILED  
14 SEP 17 PM 3:53  
SECRETARY  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**REGISTERED AGENT CHANGE  
G & C FAMILY SERVICES, CORP.**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$43.75

RECEIVED  
14 SEP 17 PM 3:17  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*[Signature]*  
SEP 18 2015  
T. LEMIEUX

Electronic Filing Menu . Corporate Filing Menu

Help

**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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: G & C FAMILY SERVICES, CORP.
2. The principal office address: 8000 HAMPTON BLVD - SUITE 304 - N. Lauderdale-FL33068
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: 9/03/2014 Document number: P03000092451
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)

Paulo Gomes Pereira

8000 Hampton Blvd - Suite 304

N. Lauderdale - FL 33068

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

Rosicleyde Gomes (Rosicleyde Gomes)

8000 Hampton Blvd - Suite 304

P.O. Box NOT acceptable

North Lauderdale - FL 33068

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.

Rosicleyde Gomes  
Signature of an officer or director

Rosicleyde Gomes - President  
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.*

Rosicleyde Gomes  
Signature of Registered Agent

9/17/2014  
Date

If signing on behalf of an entity:

\_\_\_\_\_  
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 (03/12)