

P040000137995

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*PA address  
change*

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2015 NOV 10 PM 12:09  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

NOV 10 2015  
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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 2, 2015

MACY QUINTANA  
GMQ INVESTMENT GROUP, INC.  
17 OLD KINGS RD. N. STE. J  
PALM COAST, FL 32137

SUBJECT: GMQ INVESTMENT GROUP, INC.  
Ref. Number: P04000137995

We have received your document for GMQ INVESTMENT GROUP, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 515A00023124

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: GMO INVESTMENT GROUP INC.  
Name of Corporation

DOCUMENT NUMBER: P04000137995

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:

MAVY QUINTANA  
Name of Contact Person

GMO INVESTMENT GROUP INC.  
Firm/Company

17 OLD KINGS RD. N. STE. J  
Address

PALM COAST, FL 32137  
City/State and Zip Code

MAVYREALTOR@AOL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MAVY QUINTANA at (386) 931-5567  
Name of Contact Person 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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: GMP INVESTMENT GROUP INC.
2. The principal office address: 17 OLD KINGS RD. N. STE. J  
PALM COAST, FL 32137
3. The mailing address (if different): " " " " " (SAME AS ABOVE)
4. Date of incorporation/qualification: 10/01/2004 Document number: P04000137995

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)

NAVY QUINTANA  
213 S 2nd Street, Suite # 5  
Flagler Beach, FL 32136

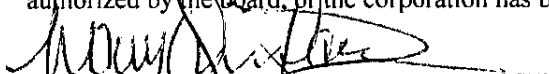
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

NAVY QUINTANA  
17 OLD KINGS RD. N. STE. J  
PALM COAST, FL 32137

P.O. Box NOT acceptable

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

NAVY QUINTANA - 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.*

  
Signature of Registered Agent

10/27/2015  
Date

If signing on behalf of an entity:

NAVY QUINTANA  
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)

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TALLAHASSEE, FLORIDA