

PO4 000 155423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

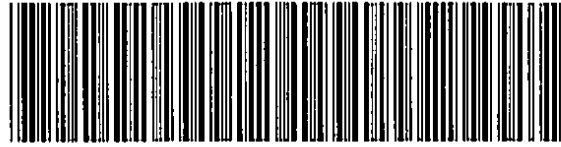
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FL

547.611-

12/7/2022

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Gramercy Vale, Inc  
Name of Corporation

DOCUMENT NUMBER: PD40000155423

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:

Darren Sherwood

Name of Contact Person  
Gramercy Vale, Inc

Firm/Company  
1100 8th Avenue S #221B

Address  
Naples, FL 34102

City/State and Zip Code  
darren@gramercyvale.com

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

For further information concerning this matter, please call:

Darren Sherwood at ( 310 ) 779 8508  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 24, 2022

DARREN SHERWOOD \*\*\*2ND MAILING\*\*\*  
1100 8TH AVENUE S #211B  
NAPLES, FL 34102

SUBJECT: GRAMERCY VALE, INC.  
Ref. Number: P04000155423

We have received your document for GRAMERCY VALE, 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):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

The registered agent must sign accepting the designation.

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.

Claretha Golden  
Regulatory Specialist II

Letter Number: 322A00023747

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 6, 2022

DARREN SHERWOOD  
1100 8TH AVENUE S #221B  
NAPLES, FL 34102

SUBJECT: GRAMERCY VALE, INC.  
Ref. Number: P04000155423

We have received your document for GRAMERCY VALE, 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):

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The registered agent must sign accepting the designation.

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

Claretha Golden  
Regulatory Specialist II

Letter Number: 922A00019802

RECEIVED  
OCT 14 2022

**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: Gramercy Vale, Inc
2. The principal office address: 1100 8th Avenue S #211B, Naples, FL 34102
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 11/13/04 Document number: P040000155423
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)

2016 Painted Palm Drive

Naples, FL 34109

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

1100 8th Avenue S, Unit 211B

P.O. Box NOT acceptable

Naples, FL 34102

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

Darren Sherwood, 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

6/14/22

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 (04/13)

**FILED**  
2022 NOV 14 AM 7:56  
SECRETARY OF STATE  
TALLAHASSEE, FL