

P04000155423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

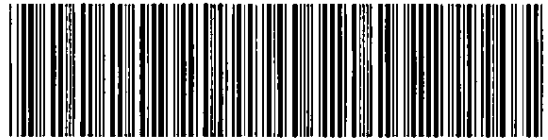
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Registered Agent must
have a Florida address.

Office Use Only



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09/18/23--01042--019 ++35.00

FILED
2023 NOV -6 AM 10:15
STATE
FLA

A. BUTLER
NOV -8 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gramercy Vale, Inc
Name of Corporation

DOCUMENT NUMBER: 104000155423

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
401 E Ontario Street, #1006

Address
Chicago, IL 60611

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 (239) 3078545
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

**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: Gramercy Vale, Inc
2. The principal office address: 365 5th Ave S. #201, Naples, FL 34102

3. The mailing address (if different): 401 E. Ontario Street #1006, Chicago, IL 60611

4. Date of incorporation/qualification: 11/13/2004 Document number: 104000155423

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)

Darren Sherwood

1100 8th Ave. S #211B

Naples, FL 34102

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

Darren Sherwood

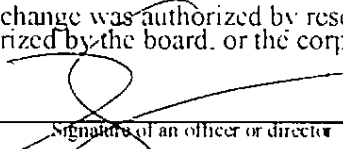
365 5th Ave S. #201

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.

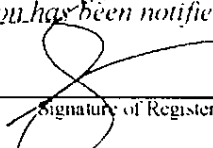


Signature of an officer or director

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

11/1/23

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)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 7, 2023

DARREN SHERWOOD
401 E ONTARIO ST #1006
CHICAGO, IL 60611

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 designation of the registered agent must be at a Florida street address.

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.

Anissa Butler
Regulatory Specialist II

Letter Number: 823A00023252

10/10/2023