## P05000095514

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

T. Sman SEP 2 0 2005

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: G.D.A. inc.  (Name of corporation)	<del>-</del>
DOCUMENT NUMBER: PO 50000 95514	
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:	٠.
(Name of contact person)	
G.D.A. inc.  (Firm/Company)	
(Firm/Company)	
14359 Miramar Parkway #175 (Address)	
Miraman, FL 33D27-4134 (City/state and zip code)	
For further information concerning this matter, please call:	
(Name of contact person) at (954) 802-6/57  (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 409 E. Gaines Street Tallahassee, FL 32399

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

-	rovisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Fioriaa Stati ge is submitted for a corporation organized under the laws of the State of	FL.	<i>s</i> 	
in order t	to change its registered office or registered agent, or both, in the State of Flori	ida.		
1. The name of the	e corporation: G. D. A. inc.			
2. The principal of	office address: 12771 SW 53 SY			. 7
	Miramay, FC 33027			
3. The mailing add	dress (if different):			) <u>=</u> .
4. Date of incorpor	pration/qualification: 7/1/05 Document number: 10500	2009	55/	14
5. The name and si Florida Departm	street address of the current registered agent and registered office on file with the ment of State:	he		
_	Gustavo Arango			
_	12771 SW 53 ST	SEC	9	
_	Miramar, PL 33027	RETAR AHASS	SEP 1	<u></u>
6. The name and s (if changed):	street address of the new registered agent (if changed) and /or registered office	Y OF STATE SEE FLORID	3 # 9:5	ED
-	14359 Miramar Parkway #175 (P.O. Box NOT acceptable)	<b>78</b> *	မှ	
	Miramar, FL 33027-4134	<del>ģņ</del> .	<u>.</u>	
The street address as changed will be	ss of its registered office and the street address of the business office of its re be identical.	egistere	d age	ent,
Such change was authorized by the	s authorized by resolution duly adopted by its board of directors or by an of a board, or the corporation has been notified in writing of the change.	ficer so	I	
(Signature	e of an orticer of director)  Gustava D. Arango (Printed or typed name and title)	Pres	idon	<u>*</u> )
I hereby accept th I further agree to of my duties, and document is being corporation has b	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complet I am familiar with and accept the obligation of my position as registered a gfiled merely to reflect a change in the registered office address, I hereby to been notified in writing of this change.	ete perj gent. C confirm	forma Or, if that	mce this the
- Pm	inter J. angs 9/8/05			
	nature of Registered Agent) (Date)			
If signing on beha				
Gust (Typ	tave D. Avango  ped or Printed Name)			

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