P07000063298

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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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R-A. Change

COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: G.T Realty Services, Inc (Name of Corporati	on)
DOCL	UMENT NUMBER: P07000063298	
The en	closed Statement of Change of Registered Office/Agent	and fee are submitted for filing.
Please	return all correspondence concerning this matter to the f	following:
	Gloria T Freyre (Name of Contact Pe	rson)
	G.T. Realty Services, Inc (Firm/Company))
	6365 Taft Street. Suite 3007. (Address)	
	Hollywood, FL 33024 (City/State and Zip C	Code)
For fu	rther information concerning this matter, please call:	
Gloria	a T Freyre at (305 803 6126 Area Code & Daytime Telephone Number)
Enclos	sed 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



July 1, 2008

GLORIA T. FREYRE GT REALTY SERVICES, INC. 6365 TAFT ST., STE. 3007 HOLLYWOOD, FL 33024

SUBJECT: GT REALTY SERVICES, INC.

Ref. Number: P07000063298

We have received your document for GT REALTY SERVICES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(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.

The current name of the entity is as referenced above. Please correct 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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 408A00039216

SEGRETARY OF STATE TALLAHASSEE, FLORIDA

00:8 HA 1-50

Division of Corporations - P.O. BQ

July 1, 2008

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Cheryl Coulliette Regulatory Specialist II

10000 Sept.

Letter Number: 408A00039216

SECRETARY OF STATE

TALL AHASSEE, FLORIGA

2003 AM 1- SUA 6002

RECEINER

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

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

statement of cha	inge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida registered agent, or both, in the State of Florida.	
1. The name of	the corporation: GT REALTY S	SERVICES, INC	
	office address: 6365 TAFT S	TREET. SUITE 3007	
3. The mailing a	ddress (if different): SAME		
4. Date of incor	poration/qualification: MAY 200	Document number: P0700063298	
	I street address of the current registerment of State:	ered agent and registered office on file with the	
	UNITED STATES CO	RPORATION AGENT, INC	
	13302 WINDING O	AKS BLVD. SUITE A100	
	TAMPA, FL 33612		:
6. The name and (if changed):	I street address of the new registered	d agent (if changed) and /or registered office	SECRETARY VISION OF CO 08 Aug 5
	GLORIA T FREYRE		AH S
	(P.O. Box NOT acc		8: 13 N
The street address changed will	ess of its registered office and the be identical.	street address of the business office of its registered	agent,
		dopted by its board of directors or by an officer so een notified in writing of the change.	
	Deple Sweetor ire officer or director)	GLORIA T FREYRE, DIRECTO (Printed or typed name and title)	
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointment as registered age to comply with the provisions of a ad I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	ent and agree to act in this capacity. ll statutes relative to the proper and complete perfor he obligation of my position as registered agent. Or, e in the registered office address, I hereby confirm th hange.	mance if this at the
<u>600</u>	gnature of Registered Agent)	7/29/08	
	chalf of an entity:	· (Date)	
	Typed or Printed Name)		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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

CR2E045 (8/05)