P11000063648

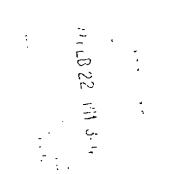
(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
Q. SILAS			
FEB 28 2022			

Office Use Only



600382147836





COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ Name	ECT: GDC AMERICA INC. of Corporation	
DOCU	UMENT NUMBER: P11000063648	
The er	nclosed Statement of Change of Registere	ed Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning thi	s matter to the following:
KRIST	TEN CARTER	
Name	of Contact Person	
PARA	CORP INCORPORATED	
Firm/C	Company	
2804 C	GATEWAY OAKS DRIVE #100	
Addre:	SS	
SACR.	AMENTO, CA 95833	
City/S	tate and Zip Code	
	PARACORP@MYPARACO	DRP.COM
E-mai	l address: (to be used for future annua	
For fur	ther information concerning this matter.	please call:
KRIST	EN CARTER	31 (800) 533-7272
	Name of Contact Person	at (800) 533-7272 Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the	
	Mailing Address:	Street Address:
	Amendment Section	Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of change is submitted for a corpo	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this oration organized under the laws of the State of	
	fice or registered agent, or both, in the State of Florida.	
1. The name of the corporation: GDC AME	RICA,INC.	
2. The principal office address: 514 North Fr Tampa, FL 33602. United States	anklin Street. Suite 201	
3. The mailing address (if different):		
4. Date of incorporation/qualification: 07/1	4/2011 Document number: P11000063648	
5. The name and street address of the curren Florida Department of State: (If resigned.	t registered agent and registered office on file with the enter resigned)	
Hutchison PLLC, LLC		
101 SE 2nd PL #E201D		
GAINESVILLE, FL 32601		
6. The name and street address of the new re (if changed):	gistered agent (if changed) and /or registered office	
PARACORP INCORPORATED -		
155 Office Plaza Drive, 1st F		
Tallahassee, FL 32301	P.O Box NOT acceptable	
The street address of its registered office ar as changed will be identical.	nd the street address of the business office of its registered agent.	
Such change was authorized by resolution authorized by the board, or the corporation	fully adopted by its board of directors or by an officer so has been notified in writing of the change.	
William Hanson	William Hanson President	
_	Printed or typed name and title ed agent and agree to act in this capacity. is of all statutes relative to the proper and complete performance cept the obligation of my position as registered agent. Or, if this change in the registered office address, I hereby confirm that the this change.	
THE SHE	2/16/2022	
Signature of Registered Agent	Date	
f signing on behalf of an entity:		
Jody Moua, Assistant Secretary 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)