P13000019105

(Re	questor's Name)	
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APR 0.7 2014

C. CARROTHERS

COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: GNGG SERVICES

Name of Corporation
P13000019105

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:

JORGE J GARCIA

Name of Contact Person

GNGG SERVICES

Firm/Company

1119 NW 32 PL

Address

MIAMI, FL, 33125

City/State and Zip Code

GARCIAJORGE44@YAHOO.COM

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

For further information concerning this matter, please call:

JORGE GARCIA

86 (4886859

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

		17.0502, 607.1508, or 617.1508, Florida or organized under the laws of the State of		
		registered agent, or both, in the State of I		
1. The name of t	he corporation: GNGG SERV	/ICES		
2. The principal	office address: 1119 NW 32	PL, MIAMI, FL 33125		
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 02/27/20	Document number: P1300	00019105	
	street address of the current regist tment of State: (If resigned, enter t	tered agent and registered office on file w resigned)	ith the	
			14 A SECR	ands.
6. The name and (if changed):	_	ed agent (if changed) and /or registered of	APR -1 AH CRETARY OF S LAHLASSEE, FI	San Andreas
	5ř. .			
	1119 NW 32 PL, MIAM	I, FL 33125 Box NOT acceptable	8: 09 TATE JORIDA	
,	1.0. 0	nor nor acceptaint		
The street addre	ess of its registered office and the be identical.	street address of the business office of it	s registered age	nt,
Such change wa authorized by th	is authorized by resolution duly a de board, or the corporation has be	dopted by its board of directors or by an een notified in writing of the change.	officer so	
		JORGE J GARCIA	Jo.	-
I hereby accept I further agree to performance of agent. Or, if the	the appointment as registered ag to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been not	Printed or typed name and tit ent and agree to act in this capacity. Ill statutes relative to the proper and con and accept the obligation of my position to reflect a change in the registered offic tified in writing of this change.	nplete	
	(Xer)	03/26/2014		
_	nature of Registered Agent	Date		-
If signing on be	half of an entity:			
T	yped or Printed Name			
•				

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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