

P13000038903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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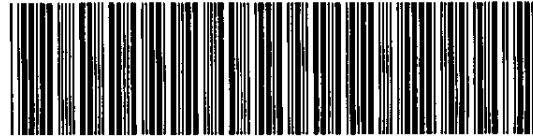
(Business Entity Name)

(Document Number)

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T. CARTER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Gecko Hospitality  
Name of Corporation

DOCUMENT NUMBER: P13000038903

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:

Robert Krzak  
Name of Contact Person

Gecko Hospitality  
Firm/Company

16880 McGregor Blvd. Suite 102  
Address

Fort Myers, FL 33908  
City/State and Zip Code

robert@geckohospitality.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Krzak at (239) 690-7006  
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**

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 FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Crecko Hospitality  
2. The principal office address: 5237 Summerline Commons Suite 408  
Fort Myers FL 33908  
3. The mailing address (if different): \_\_\_\_\_

4. Date of incorporation/qualification: August 6, 2013 Document number: PL3000038903

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)

Robert Krzak  
15055 Tamarind Cay Court Unit 1206  
Fort Myers, FL 33908

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

Robert Krzak  
16880 McGregor Blvd. Suite 102  
P.O. Box NOT acceptable  
Fort Myers, FL 33908

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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] \_\_\_\_\_ Robert Krzak  
Signature of an officer or director 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] \_\_\_\_\_ 11/7/2013  
Signature of Registered Agent Date

If signing on behalf of an entity:

Robert Krzak  
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