

5/8/25, 3:41 PM

P18000077031

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : KOUTOULAS & RELIS, LLC
Account Number : I20070000005
Phone : (954)332-1345
Fax Number : (954)332-1346

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**REGISTERED AGENT CHANGE
GCR INDUSTRIES, INC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$35.00

R. Leavers
5/16/25

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Corporate Filing Menu

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COVER LETTER**TO:** Amendment Section
Division of Corporations**SUBJECT:** GCR Industries Inc
Name of Corporation**DOCUMENT NUMBER:** P18000077031

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:

Ursula Atkinson

Name of Contact Person

Koutoulas & Relis LLC

Firm/Company

777 Yamato Road Ste 100

Address

Boca Raton FL 33431

City/State and Zip Code

info@krcpas.us

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

For further information concerning this matter, please call:

Ursula Atkinson

at (954)

332-1345

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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2025 MAY 13 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FL

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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: GCR Industries Inc
2. The principal office address: 6919 SW 18th Street, Ste C236, Boca Raton, FL 33433
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 09/12/2018 Document number: P18000077031
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)

William Lapis1101 Holland Drive Unit 16Boca Raton, FL 33487

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

6919 SW 18th Street Ste C236P.O. Box NOT acceptableBoca Raton, FL 33433

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.

William Lapis, Vice President
 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.

5-6-2025
 Signature of Registered Agent Date

If signing on behalf of an entity:

William Lapis
 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

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