## 197000001061

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## **COVER LETTER**

TO: Amendment Section of Corporation of Corporation of Corporation (Corporation)				
SUBJECT:	GD HARDWAF		_	
	rame or ex	orporation		
DOCUMENT NUMBER	R:P970	000001061	_	
The enclosed Statement o	f Change of Registered Office	e/Agent and fee are submitted for	filing.	
Please return all correspondence concerning this matter to the following:				
·	Ū	•		
	GEOFFRE\	Y DEPASS		
<del></del>	Name of Cor	ntact Person	<del></del>	
	GD HARDW			
	Firm/Co	mpany	_	
	1275 SAWGRASS		_	
	Addı	ress		
SUNRISE, FL 33323				
i	City/State an	id Zip Code		
	geoffdepass@de	eltaregent.com		
E-ma	il address: (to be used for fu	uture annual report notification	<u>1)</u>	
For further information concerning this matter, please call:				
GEOFFE	REY DEPASS	at ( 954 ) 85	51_0001	
= : :	Contact Person	at ( <del>954)85</del> Area Code & Daytime Tel	ephone Number	
Enclosed is a \$35.00 check made payable to the Department of State.				
<u> </u>	1ailing Address:	Street Address:		
-	Amendment Section	Amendment Section	•	
	Division of Corporations	Division of Corporat	ions	
	P.O. Box 6327 Callahassee, FL 32314	Clifton Building 2661 Executive Cent	ter Circle	
1	ananassee, i L J2J14	ZOOT EXCOUNTE COM	or Chele	

Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: GD HARDWARE CORP.
	office address: 1275 SAWGRASS COPR. PARKWAY , FLORIDA 33323
	address (if different):
4. Date of incor	poration/qualification: 01/06/1997 Document number: P97000001061
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	CFRA, LLC
	4221 W. BOY SCOUT BLVD. 10TH FLOOR
	TAMPA, FL 33607-5736
6. The name and (if changed):	TAMPA, FL 33607-5736  d street address of the new registered agent (if changed) and /or registered office  GEOFFREY S. DEPASS  1275 SAWGRASS CORP. PARKWAY  P.O. Box NOT acceptable
	GEOFFREY S. DEPASS
	1275 SAWGRASS CORP. PARKWAY
	SUNRISE, FL 33323
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, I be identical.
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board of the corporation has been notified in writing of the change.
Signatu	GEOFFREY DEPASS - DIRECTOR Printed or typed name and title
I further agree of my duties, ar document is be	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
Y	4/28/2010 Enature of Registered Agent Date
•	ehalf of an entity:
Т	Typed or Printed Name

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (8/05)

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