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SAUGELT ANT OF STATE
TALLAHAS SEE FLORIDA

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COVER LETTER

TO: Amendment Section Division of Corporati	ons	: •
SUBJECT:	RENAR GCII, INC	<u> </u>
•	Name of Corporation	,
DOCUMENT NUMBER:	P9900005	6997
The enclosed Statement of Ch	nange of Registered Office/Agent	and fee are submitted for filing.
Please return all corresponder	nce concerning this matter to the fo	ollowing:
•	·	-
	Rhonda S. Row	re
	Name of Contact Per	
•	Renar GCII, Inc	
· -	Firm/Company	
	t min company	
•		
,	3731 NE Pineapple	Ave
	Address	
	·	
•	Jensen Beach, FL 3	34957
	Jensen Beach, FL 3 City/State and Zip C	ode
,		i
	dawnginter@renarhom	
E-mail ac	ddress: (to be used for future an	inual report notification)
For further information conce	rning this matter, please call:	- : . ·
•		·
Rhonda S		772 692-7800
Name of Cont	act Person A	rea Code & Daytime Telephone Number
Enclosed is a \$35.00 check m	ade payable to the Department of	State
•		
Mail	ing Address:	Street Address:
	endment-Section	Amendment Section
Divi	sion of Corporations	Division of Corporations
	Box 6327	Clifton Building:
Talla	ahassee, FL 32314	2661 Executive Center Circle
•	• • • • • •	Tallahassee, FL 32301

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

		Donas CCII Is		
	•	: Renar GCII, Ir 3731 NE Pineapp		
2. The principal	office address;		L 34957	
3. The mailing a	uddress (if diffe			
4. Date of incor	poration/qualifi		Document number:	
		of the current registered (If resigned, enter resign	agent and registered office on fil	e with the
•	M. Lanning	ј Гох		
	3473 SE W	/illoughby Blvd		FI JUN 2
		34994		2 F
6. The name and (if changed):	d street address Arden Do	oo le	ent (if changed) and /or registered	d office REALE
		ineapple Ave		
•		P.O. Box N	OT acceptable	
_	Jensen Bea	ach, FL 34957		
The street address changed will	ess of its regist be identical.	ered office and the stree	et address of the business office	of its registered agent,
			ed by its board of directors or bootified in writing of the change	
Signatur	ire of an officer or d	rector	Arden Dos	
			and agree to act in this capacity atutes relative to the proper and bligation of my position as regi the registered office address, I i se.	
_ ang	C Dec	 d Agent	6-10- Date	10
TC 1	half of an enti	ty:	•	
it signing on be				