I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under
oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and
that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: DAN J BOKLAGE

Electronic Signature of Signing Authorized Person(s) Detail

1281 AUTUMN BREEZE CIRCLE GULF BREEZE, FL 32563

Entity Name: GBF CONSULTING, LLC

Current Principal Place of Business:

Current Mailing Address:

DOCUMENT# L13000014895

1281 AUTUMN BREEZE CIRCLE GULF BREEZE, FL 32563

FEI Number: 46-1904904

Name and Address of Current Registered Agent:

BOKLAGE, DAN J 1281 AUTUMN BREEZE CIRCLE GULF BREEZE, FL 32563 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: DAN BOKLAGE

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGRM
Name	BOKLAGE, DAN J
Address	1281 AUTUMN BREEZE CIRCLE
City-State-Zip:	GULF BREEZE FL 32563

Certificate of Status Desired: Yes

06/30/2018 Date

06/30/2018 Date

FILED Jun 30, 2018 Secretary of State CC6579035559