# 104000080549

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SECRETARY OF STATE OF ALLAHASSEE, FLORIDA

T. CLINE MAY 3 1 2012

EXAMINER

# **COVER LETTER**

TO: Registration So Division of Con	ection rporations			•	
SUBJECT:	Gilman	Investments LC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please return all correspondent	ondence concerning this matter	r to the following:			
		David D. Gilman			
		Name of Person			
		David D. Gilman			
		Firm/Company			
		PO Box 11007			
•		Address			
	Fort I	Lauderdale, Florida 3333	9		
	**************************************	City/State and Zip Code	<del></del>		
	N. annall and allow in a	daduc17@aol.com (to be used for future annual report n		56 8	
		•	ouncation)	EC7	
For further information (	concerning this matter, please	call:			8
D	avid Gilman	at (_954_)	410 3030	30 SSE	-
Name o	of Person	Area Code & Day	time Telephone Number	2012 KAY 30 AH ILI AL SEURETARY OF STATE ALLAHASSEE, FLORIDI	TI
Enclosed is a check for t	he following amount:			<b>2 2 3 3 3 3 3 3 3 3 3 3</b>	
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certified (	of Status &	

### MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Giln	nan Investments, LC						
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now apported Limited Liability Company	ears on our records.)					
The Articles of Organization for this Limited Liabil  Florida document number L0400080549		November 5, 2004	and assigned				
This amendment is submitted to amend the following	•						
If amending name, enter the new name of the limited liability company here:							
Cardina	al Southern Equities, LL	С					
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Con	pany," the designation "Ll	_C" or the abbreviation				
Enter new principal offices address, if applicable	:						
(Principal office address MUST BE A STREET A	DDRESS)						
Enter new mailing address, if applicable:			2012   SECR				
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>	· ··· · · · · · · · · · · · · · · · ·					
			38 C				
B. If amending the registered agent and/or r		h	THE E				
registered agent and/or the new registered office		our records, enter th	ie wame of the mey				
Name of New Registered Agent:		•					
-							
New Registered Office Address:		Enter Florida street addr	ess				
		. Florida					
<del>-</del>	City	, - 131.334	Zip Code				

New Registered Agent's Signature, if changing Registered Agent:

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

ما درامیند

MGR = Manager

<u>le</u>	<u>Name</u>	Address	Type of Actio
<del></del>			Add Remove
			Add
			Damasus
			Remove
•		•	FAdd 7
			25
If amei	nding any other information, enter cha	ange(s) here: (Attach additional sheets, if nec	Remove
_		·	
   ted	May 21, 2012		
		Member or authorized representative of a member_	<u> </u>

Page 2 of 2

Filing Fee: \$25.00