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**EXAMINER** 



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## **COVER LETTER**

TO: Registration Section . Division of Corporations	
SUBJECT: G.B. CONSTRUCTION MANAGEMENT SERVICES (Name of Limited Liability Company)	MC
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
JOCELYHE BOIGRIS (Name of Person)	
G.B. CONST. MGHT SERV. LLC. (Firm/Company)	
9622 SW 146 AVE (Address)	
MIAMI FL, 33186 (City/State and Zip Code)	
For further information concerning this matter, please call:	
JOCELYNE BOIGRIS at (305) 776 - 6258 (Name of Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	

□\$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

□\$30.00 Filing Fee & Certificate of Status

\$25.00 Filing Fee

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

□\$60.00 Filing Fee,

Certified Copy

Certificate of Status &

(additional copy is enclosed)

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

## G.B. CONSTRUCTION MANAGEMENT SERVICES L.L.C (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>FEB. 21, 2005</u> and assigned Florida document number <u>L0500018262</u>.

This amendment is submitted to amend the following:

This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liability company here:			
G.B. CONSTRUCTION MANA The new name must be distinguishable and end with the "L.L.C."			abbreviation	
Enter new principal offices address, if applicable:	_ <del>_</del>		<u> </u>	
(Principal office address MUST BE A STREET AL	DDRESS)	09	¥S 3S	
	•	JAN	오유	
			25.55 25.55	
Enter new mailing address, if applicable:		<u> </u>	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX		ယ္	<u> </u>	
			3	
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		cords, <u>enter the name o</u>	f the new	
Name of New Registered Agent:	<u>"                                    </u>		<u></u>	
New Registered Office Address:				
	(Enter Flo	(Enter Florida street address)		
		, Florida		
	(City)	(Zip Cod	(e)	

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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Title Name Address Type of Action** GERALD J. BEAULIEU SUGARWOOD WAY Add FL, 33186 Rem MGR Remove JOCELYME BOIGRIS MGR Add Add Remove 🗂 Add Remove ∫ Add Remove ┌ Add Remove Add [ff] Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated JAHUARY Signature of a member of authorized representative of a member BOUGRUS
Typed or printed name of signee JOCETAHE

Page 2 of 2

Filing Fee: \$25.00