

L10000108793

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GORGAL, LLC

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Certificate of Status	0
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Page Count	04
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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

GORGAL, LLC

(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 10/18/2010 and assigned Florida document number L10000108793

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal office address, if applicable: 15 NW 7 AVENUE
FORT LAUDERDALE, FL 33311
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 15 NW 7 AVENUE
FORT LAUDERDALE, FL 33311
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

City _____ Florida _____ 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 605, 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

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MABEL PRADO FERNANDEZ	15 NW 7 AVENUE	<input type="checkbox"/> Add
		FORT LAUDERDALE, FL 33311	<input type="checkbox"/> Remove
MGRM	EMILIO JOSE COBAS GARCIA	2999 NE 191 ST, PH8	<input type="checkbox"/> Add
		AVENTURA, FL 33180	<input type="checkbox"/> Remove
MGRM	MANUEL COBOS GARCIA	2999 NE 191 ST, PH8	<input type="checkbox"/> Add
		AVENTURA, FL 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

Four horizontal lines for amending information.

E. Effective date, if other than the date of filing: 05/22/2014 (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated _____

Signature of a member or authorized representative of a member

EMILIO JOSE COBAS GARCIA, MGRM

Typed or printed name of signer

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