

L15000170313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

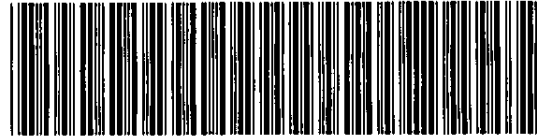
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 02 2016
WARREN
& MASON

CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-222-1092

RSS GSMS 2012CJ9-FL SCP, LLC

L15000170313

[Empty box]

Nonprofit

Foreign

Limited Partnership

LLC

Certified Copy

Name Change Amendment

Call When Ready

Walk In

Mail Out

Name _____

Availability _____

Document _____

Examiner _____

Updater _____

Verifier _____

W.P. Verifier _____

Amendment

Name Change

Dissolution/Withdrawal

Reinstatement

Annual Report

Name Registration

Fictitious Name

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After 4:30

Pick Up

Order#:

10032169

Ref#:

Amount: \$

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: RSS GSMS 2012CJ9-FL SCP, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LORI BUCKLER
Name of Person

RSS GSMS 2012CJ9-FL SCP, LLC
Firm/Company

790 NW 107TH AVENUE, SUITE 400
Address

MIAMI, FLORIDA 33172
City/State and Zip Code

SPEREQUESTS@RIALTOCAPITAL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORI BUCKLER at (**305**) **229-6675**
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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**

RSS GSMS 2012CJ9-FL SCP, 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 October 6, 2015 and assigned Florida document number L15000170313.

This amendment is submitted to amend the following:

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

RSS GSMS 2012GCJ9-FL SCP, LLC

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 offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

790 NW 107TH AVENUE, SUITE 400

MIAMI, FLORIDA 33172

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

790 NW 107TH AVENUE, SUITE 400

MIAMI, FLORIDA 33172

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

Florida

City

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

Page 1 of 3

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TALLAHASSEE, FLORIDA

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>
AMBR	GS MORTGAGE SECURITIES CORP TRUST 2012-GCJ9 L-T REMIC	790 NW 107TH AVENUE, SUITE 400 MIAMI, FLORIDA 33172	<input checked="" 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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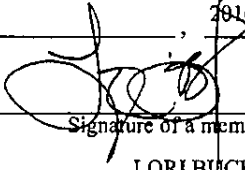
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 Add
 Remove

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

NAME CHANGE FROM RSS GSMS 2012CJ9-FL SCP, LLC TO RSS GSMS 2012GCJ9-FL SCP, LLC

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated MAY 31, 2016



Signature of a member or authorized representative of a member

LORI BUCKLER, AUTHORIZED SIGNATORY

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA

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