

L19000052952

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

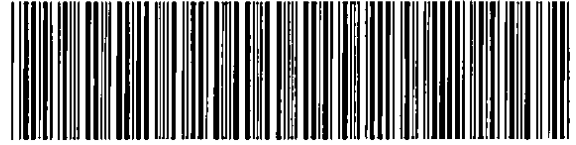
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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19 MAR -6 4M PM 53

FILED  
19 MAR -6 AM 12: 22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

MAR -7 2019

Sonata Research  
Requester's Name

\_\_\_\_\_  
Address

656-5454  
City/State/Zip Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (IF ABOVE):**

1. GEFTIC, LLC  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(Corporation Name) (Document #)

3. \_\_\_\_\_  
(Corporation Name) (Document #)

4. \_\_\_\_\_  
(Corporation Name) (Document #)

- Walk in
- Pick up time
- Certified Copy
- Mail out
- Will wait
- Certificate of Status
- Photocopy

**NEW FILING**

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

**AMENDMENT**

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

**OTHER FILING**

- Annual Report
- Fictitious Name

**REGISTRATION/QUALIFICATION**

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF  
GEFTIC, LLC  
A Florida Limited Liability Company

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were electronically filed on February 22, 2019 and assigned Florida document number L19000052952.

This amendment is submitted to amend the following [check all that apply]:



Amending name. The new name of this Limited Liability Company is:

GEFTICO, LLC

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



Amending registered agent and/or registered office address:

Name of New Registered Agent: \_\_\_\_\_  
(must sign below)

*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, Florida Statutes.*

\_\_\_\_\_  
Signature of New Registered Agent

New Registered Office Address:

\_\_\_\_\_  
(Enter Florida street address)

\_\_\_\_\_  
(City)

\_\_\_\_\_, Florida

\_\_\_\_\_  
(Zip Code)

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19 MAR -6 AM 12:  
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TALLAHASSEE, FLORIDA

Amending the Managers or Managing Members of record:

MGR = Manager (if manager managed)  
MGRM = Managing Member (if member managed)

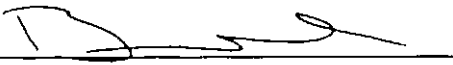
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of <u>Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Change <input type="checkbox"/> Remove

Amending Other Information:

\_\_\_\_\_  
\_\_\_\_\_

Effective date if different than the date of filing: \_\_\_\_\_  
(Cannot be prior to date of filing or, if delayed, more than 90 days after amendment file date)

Dated: March 4 2019

  
\_\_\_\_\_  
Brian M. Walsh, Authorized Representative