

Division of Corporations

419000056164

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H19000216109 3)))



H190002161093ABCs

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To: Division of Corporations
 Fax Number : (850) 617-6383

From: Account Name : GENERAL SOLUTIONS INC
 Account Number : I20140000086
 Phone : (305) 255-3310
 Fax Number : (305) 255-3320

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address, please.

Email Address: blanca@general-solutionsinc.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GOOD FOR U LLC

Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

JUL 22 2019

M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 19, 2019

GOOD FOR U LLC
8414 NW 66 ST
MIAMI, FL 33166

SUBJECT: GOOD FOR U LLC
REF: L19000056164

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

Operating agreements are not filed with this office and are to be maintained internally within the records of the business. Please remove the operating agreement from the amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6939.

Agnes Lunt
Regulatory Specialist III

FAX Aud. #: H19000216109
Letter Number: 719A00014698

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H190002161093

GOOD FOR YOU 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 03/01/2019 and assigned
Florida document number L19000056164

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8290 NW 14 ST

(Principal office address MUST BE A STREET ADDRESS)

DORAL FL 33126

Enter new mailing address, if applicable:

8290 NW 14 ST

(Mailing address MAY BE A POST OFFICE BOX)

DORAL FL 33126

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:

RICARDO REY SOTOMAYOR

New Registered Office Address:

8290 NW 14 ST

Enter Florida street address

DORAL

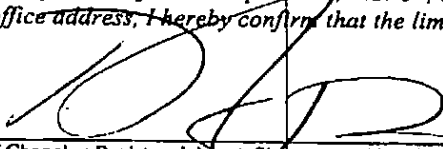
City

Florida 33126

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 607, 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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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or removed from our records; authorized to manage, enter the title, name, and address of each person being added

H190002161093

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	NINA A SAGMEISTER	8414 NW 66TH. STREET MIAMI, FL 33166	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ORLANDO A CONTRERAS	8414 NW 66TH. STREET MIAMI, FL 33166	<input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	OSCAR A TIMPANARO	8414 NW 66TH. STREET MIAMI, FL 33166	<input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

SECRETARY OF STATE
TAMM LAMARCA

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