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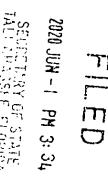
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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

FO: Registration Se	ction		
Division of Cor	porations	: .	•
	ė	• ,	_
• <u> </u>		_	•
SUBJECT: Beacon	Property Group LLC		<u> </u>
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Maran astuma all animana	adaman and and the most on	to the following:	
Please return an correspo	ndence concerning this matter	to the following:	
	Daniel Foltz		
		Name of Person	
	D D		
	Beacon Property Gr		
		Firm/Company	
	119 Grand Beach P	1	
	- TYO Grand Bedon't	Address	
		Address	
	Tampa, FL 33609		
		City/State and Zip Code	
	daniel foltz35@gmai	i.com	
	E-mail address: (to be used for future annual report notific	cation)
Car Garden in Commercian a	oncerning this matter, please c	ott.	
ror turtner information c	oncerning this matter, please co	air.	
Daniel Foltz		at (305) 747-0315	
Name o	f Person	Area Code Daytime	Telephone Number
		ŕ	·
Enclosed is a check for the	ne following amount:		
▼ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
25,00 rining rec	Certificate of Status	Certified Copy	Certificate of Status &
	Certificate of Status	(additional copy is enclosed)	Certified Copy
		(additional Cipy is enclosed)	(additional copy is enclosed)
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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

Beacon Property Group LLC		
(<u>Name of the Limited Liab</u> i (A Flori	ility Company as it now appears on our da Limited Liability Company)	records.)
The Articles of Organization for this Limited Liability	Company were filed on 10/28/20	19 and assigned
Florida document number L19000269337	 ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	mited liability company here:	
Gulf Atlantic Investment Group LLC		
The new name must be distinguishable and contain the words "Li	imited Liability Company," the designation	n "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	ORESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2020 JU SECRE
B. If amending the registered agent and/or regregistered agent and/or the new registered office ad		
		ST & D
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street	address
	isuer rioriau street	
	City	Florida Ziv Code
	(m)	sup Conse

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			Remove
			Change
			Add
			Remove
			Change
			□ Remove
			Change
			Remove
			Change
			□ Remove
			Change
			Add
			□ Remove
			Change

D. If amending a	ny other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	
	
-	
E. Effective date,	if other than the date of filing: 5/1/2020 (optional)
Note: If the dat	e is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(but it is listed in this block does not meet the applicable statutory filing requirements, this date will not be listed as the active date on the Department of State's records.
	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: ay after the record is filed.
Dated May 1,	2020
	Signature of a member or authorized representative of a member
Dai	niel Foltz

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00