

6/12/23, 14:46

Division of Corporations

L2000352906
Florida Department of State
Division of Corporations
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To: Division of Corporations
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From: Account Name : MONAHAN MIJARES CPA PA
Account Number : L20050000157
Phone : (305)407-1438
Fax Number : (305)397-1003

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GTITHOST LLC

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APPROVED AND FILED

Electronic Filing Menu

Corporate Filing Menu

Help

DEC 07 2023

K. Brumbley

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GTITHOST 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:

Roark Ronald Monahan, CPA

Name of Person

MONAHAN-MIJARES CPA, PA

Firm/Company

75 Valencia Ave Suite 703

Address

Coral Gables, Florida

City/State and Zip Code

elismor.castillo@monahanmijares.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Roark Ronald Monahan at () 305 407-1440

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 Address:
 Registration Section
 Division of Corporations
 The Centre of Tallahassee
 2415 N. Monroe Street, Suite 810
 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GTTHOST 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 11/06/2020 and assigned Florida document number L20000352906.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(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

_____, Florida _____

City

Zip Code

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ADD
APPROVAL

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

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

Multiple horizontal lines for amending information.

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 prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated December 06, 2023

Handwritten signature of Valeria Viana

Signature of a member or authorized representative of a member

VIANA, VALERIA

Typed or printed name of signee