

4/14/22, 3:57 PM

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L21000496808

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To:

Division of Corporations
 Fax Number : (850)617-6380

From:

Account Name : UNITED TITLE TEAM LLC
 Account Number : I20210000119
 Phone : (786)816-4328
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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.****

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
GM3 LEGACY INVESTMENT LLC**

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A. BUTLER
APR 19 2022

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT **FILED**
TO
ARTICLES OF ORGANIZATION **2022 APR 18 AM 8:33**
OF

SECRETARY OF STATE
TALLAHASSEE, FL

GM3 LEGACY INVESTMENT 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 11/18/2021 and assigned
Florida document number L21000496808.

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	MARIN DUQUE GLADYS		<input type="checkbox"/> Add
		29627 JUNTTI PARK CT, KATY, TX 77494	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GRACIANO MARIN FEDERICO		<input type="checkbox"/> Add
		29627 JUNTTI PARK CT, KATY, TX 77494	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GRACIANO MARIN MATEO		<input type="checkbox"/> Add
		29627 JUNTTI PARK CT, KATY, TX 77494	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

