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(Requestor's Name)
(Address)
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COVER LETTER

TO: Registration Section

Division of Cor	Division of Corporations		
	ATIONS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	GASHI, BAJRAM		
		Name of Person	
	B-RENOVATIONS LLC		
		Firm/Company	
	1456 RIDGELANE CIR		
	<u> </u>	Address	
	CLEARWATER, FL 3375	55	
		City/State and Zip Code	1
	GS B1 E-mail address: (Norks @ gmai	l com ification)
For further information c	oncerning this matter, please c	all:	
GASHI, BAJRAM		727 967-2220	
Name o	f Person	at () Area Code Daytir	ne Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	nation
Registration Section Division of Corporations		Registration Section Division of Corporations	
P.O. Box 632	•	The Centre of	-
Tallahassee.	FL 32314	2415 N. Monro	be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

B-RENOVATIONS LLC

2022 MAR 16 PM 12: 39

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our re Liability Company)	SECRETARY OF STATE TALLAHASSEE, FL	
The Articles of Organization for this Limited Liability Company	were filed on <u>02/09/2022</u>	and assigned	
Florida document number L22000091858			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
GSB CONSTRUCTION LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	1456 N RIDGELANE CIR		
	Clearwater FL 33755		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	1456 N RIDGELANE CIR		
	Clearwater FL 33755		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Enter i lorida street a		
	, Florida		
	City	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	rperformance of my dutie provided for in Chapter (s, and I am familiar with and 605, F.S. Or, if this document is	

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	BAJRAM GASHI	1456 N RIDGELANE CIR	bbA&
		Clearwater FL 33755	□Remove
			□Change
			JAdd
			∐Remove
			Change
			□Remove
			□Change
			□Remove
		L]Remove	
			Change
			□Add
			Remove
•			□Change

	
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te: If	e date, if other than the date of filing:
s filed	
ed	03/10/2022
	Signature of a member or authorized representative of a member
	BAJRAM GASH/ Typed or printed name of signee

Filing Fee: \$25.00