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PICK-UP WAIT MAIL				
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(Business Entity Name)				
(Document Number)				
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COVER LETTER

Division of C			
SUBJECT:	gB	ench, LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	pondence concerning this matte	er to the following:	
	<u> </u>	Steven Glomski	
		Name of Person	
gBench, LLC			
		Firm/Company	
	833 H	lighland Avenue, Suite	101
		Address	
Orlando, FL 32803			
City/State and Zip Code			
	Steve F-mail address:	en.glomski@gbench.c (to be used for future annual rep	OM out notification)
For further information	concerning this matter, please	·	,
Si	even Glomski	at (407)	982-0053
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	S55.00 Filing Fee & Certified Copy (additional copy is en	\$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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



Zip Code

gBench, 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 September 6, 2011 L11000101415 Florida document number 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 end with 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

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 608, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Name Address **Type of Action** MGR Sara Glomski 1226 West New Hampshire Street ☐ Add Orlando, FL 32804 √ Remove Steven Glomski MGR 1226 West New Hampshire Street ✓ Add Remove Orlando FL 32804 ☐ Add _ Remove \square Add Remove □Add □ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) February 11 2012 Dated _ Signature of a member or authorized representative of a member Sara Glomski Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00