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B. KOHR
JUN 14 2010
EXAMINER

DIVISION OF CORPORATIONS

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Co	rporations ;'	·	* *		
SUBJECT:		PROPERTIES, LL	С		
Name of Limited Liability Company					
			•	O OFF	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.		1/8	
Please return all corresp	ondence concerning this matter	to the following:		24	
	G	iwendolyn J. Spencer		OUN PARTO	
		Name of Person			
	Sp	pencer Law Firm, PLC	,		
		Firm/Company			
3656 Shamrock W					
		Address			
Tallahassee, FL 32309					
	20	City/State and Zip Code	1		
	E-mail address: (t	hra_ipek@yahoo.com to be used for future annual repo	ort notification)		
For further information	concerning this matter, please c	all:			
	dolyn J. Spencer	at (<u>850</u>)	894-3888	-	
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 each	\$60.00 Filing Fee Certificate of Structure o	tatus &	
Regis	LING ADDRESS: tration Section	Registration			
Division of Corporations P.O. Box 6327		Division of Clifton Bui	Corporations Iding		

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GATEPOS	T PROPERTIES, L	LC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea	rs on our records.)		
(A Florida	Enimed Elability Company)		TAGE.	
The Articles of Organization for this Limited Liability (Company were filed on	02/24/2004	and assigned to the control of the c	
Florida document numberL0400014602			A COLO	
Florida document number	 '			
			3	
This amendment is submitted to amend the following:			ku i	
A. If amending name, enter the new name of the lin	nited liability company be	ro.	0	
A. If amending name, enter the new name of the in	med nabinty company ne	<u></u> .		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	any," the designation "LL	.C" or the abbreviatio	
Enter new principal offices address, if applicable:				
• •	DECC.			
(Principal office address MUST BE A STREET ADD	<u>KESS)</u>			
Enter new mailing address, if applicable:				
• • • • • • • • • • • • • • • • • • • •	-			
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or regis		our records, enter th	e name of the new	
registered agent and/or the new registered office add	<u>lress here</u> :			
Name of New Registered Agent:				
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 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.

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 **Type of Action** <u>Title</u> <u>Name</u> Address **MGRM** Sehra Ipek 8064 Red Eagle Road ✓ Add Tallahassee, FL 32312 Remove ☐ Add Remove _ ☐ Add Remove ∏Add Remove ___Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated _____ June 11 2010 of a member or authorized representative of a member Grizel Ipek

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00