14000053810

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	·
(Ci	ty/State/Zip/Phone #	<i>‡</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	*)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	·





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K. SALY EXAMINER JUN 15

COVER LETTER

TO::	Registration Sec Division of Corp			
CHID H	GULF-DOC			
SUBJI	cci:	Name of Lim	ited Liability Company	
The en	closed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspon	ndence concerning this matter	to the following:	
		KERRY ANNE SCHULT	Z, ESQ.	
			Name of Person	
		FOUNTAIN, SCHULTZ &	& ASSOCIATES, P.L.	
			Firm/Company	
		2045 FOUNTAIN PROFE	SSIONAL COURT, SUITE A	
			Address	
		NAVARRE, FLORIDA 32	2566	
			City/State and Zip Code	
		kaschultz@fountainlaw.con		·
			to be used for future annual report notif	ication)
For fur	ther information co	oncerning this matter, please ca	all:	
Kerry	Anne Schultz		850 939-3535 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclos	sed is a check for th	e following amount:		
) () \$2	5.00 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2016 JUN 13 AM 11:52

GULF-DOC,LLC

(Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

(A ric	onda Elinited Elaoliny Company)	LUMICA
The Articles of Organization for this Limited Liabilit Florida document number L04000053810	• •	and assigned
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 AD	DRESS)	
	 	_
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office a		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Floric	la
	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>	Name	Address	Type of Action
MGRM	Mark A. Giovanini	600 East Government Street	
		Pensacola, FL 32502	■ Remove
			☐ Change
MGRM	Mark A. Giovanini, Trustee	600 East Government Street	= Add
	Trust dated June 3, 2016	Pensacola, FL 32502	Remove
		•	Change
	·		
	·		□ Remove
			☐ Change
			TANK J
			Remove T
			□ Add
		·	Remove
		•	
	: 		Add
			□ Remove
			☐ Change

					
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···					
Effective date, if other (If an effective date is listed, to Note: If the date inserted document's effective date.	he date must be specific I in this block does n	and cannot be prior ot meet the applic	to date of filing or more able statutory filing re	(optional) than 90 days after filing.) equirements, this date v	Pursuant to 605.0207 (3) vill not be listed as the
the record specifies a) The 90th day after			t an effective tim	e, at 12:01 a.m. c	n the earlier of:
Dated June 3	, /	2016			
	11/1				

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00