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	(Requ	iestor's Name	e)
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Certified Copies		Certificate	es of Status

Special Instructions to Filing Officer:

L. SELLERS

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EXAMINER

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SECRETARY 15:0 TATE

COVER LETTER.

:01,		of Corporations		1	
SUBJE	ECT:	GC Sc	OLUTIONS, LLC		* ***
	···	<u> </u>	imited Liability Company		
				•.	
	•				
The end	closed Art	cles of Amendment and fee(s) are	submitted for filing.		
Please r	return all c	orrespondence concerning this mat	ter to the following:		
•		•			
			CLAY PAVLICK		
	•		Name of Person		
				:	
		 	Firm/Company		
	1. 3			•	
	•		P.O. BOX 344	·	
	<u>;</u>		Address	· .	
		•	CANIDEL EL 22057	- , è	
			SANIBEL, FL 33957 City/State and Zip Code		
	,		gailstravl@aol.com		• •••
	,	E-mail address	s: (to be used for future annual report noti	fication)	
For furt	ther inforn	ation concerning this matter, pleas	e call:		
	1	CLAY PAVLICK	at (239)	297-3006	
	,	Name of Person	Area Code & Daytin	ne Telephone Number	
Enclose	ed is a che	k for the following amount:			
\$25.	.00, Filing		\$55.00 Filing Fee &	\$60.00 Filing	
		Certificate of Status	Certified Copy (additional copy is enclose	Certificate d) Certified C	
	75		(unantional copy to effection		copy is enclosed)
	•			•	
		1		⁶ 4	
		MAILING ADDRESS:	STREET/COUR		,
	•	Registration Section Division of Corporations	Registration Section : Division of Corporations		
	4	P.O. Box 6327	Clifton Building		: - !
		Γallahassee, FL 32314	2661 Executive C Tallahassee, FL 3		 1 1

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GC SOLUTIONS, LLC

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

(one my company,				
The Articles of Organization for this Limited Liability Company	were filed on	8/31/2004	and	l assign	ned
Florida document numberL0400064792		·			:
This amendment is submitted to amend the following:		ı			
A. If amending name, enter the new name of the limited liab	oility company here	•			ļ
BAYSHORE GENERAL	CONTRACTORS	, LLC	1		ļ
The new name must be distinguishable and end with the words "Lim "L.L.C."	ited Liability Compan	y," the designation "I	LLC" or t	he abb	reviation
Enter new principal offices address, if applicable:		ŧ			'
(Principal office address MUST BE A STREET ADDRESS)					
-					
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		17			:
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		r records, enter 1	the nam	e of t	he new
Name of New Registered Agent:			SEC		1,
New Registered Office Address:					C. Seller Seller
76	Ente	r Florida street ada	ress:	ထာ	4
<u> </u>		, Florida		PK	
·	City		Zip C	ode	122
New Registered Agent's Signature, if changing Registered Agent:			¥61.	ယ	

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 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:

Title - 80	<u>Name</u>	<u>Address</u>	Type of Action
		,	<u> </u>
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D. If amendi	ng any other information, er	iter change(s) here: (Attach additional sheets, i	if necessary.)
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Dated	JANUARY 13	. 2011	:
Jaieu	0,440,441		'
;	//	young	
_	Signature o	fa member or authorized representative of a member	er .
_		CLAY PAVLICK Typed or printed name of signee	
\$ 4		Page 2 of 2	

Filing Fee: \$25.00