

104000068721

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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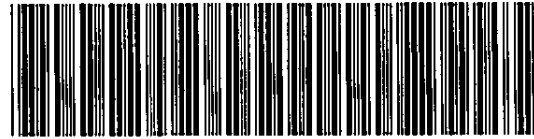
(Business Entity Name)

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2018 MAY 10 PM 12:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** GULF BRISAS, L.L.C.

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gaby Fraifer

\_\_\_\_\_  
Name of Person

GULF BRISAS, L.L.C.

\_\_\_\_\_  
Firm/Company

4701 W. HILLSBOROUGH AVENUE

\_\_\_\_\_  
Address

TAMPA, FL 33614

\_\_\_\_\_  
City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gaby Fraifer

813

901-5182

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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 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**

GULF BRISAS, L.L.C.

(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 09/20/2004 and assigned  
Florida document number L04000068721.

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 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

Florida

City

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TALLAHASSEE, FLORIDA

**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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Gaby Fraifer	4701 W. HILLSBOROUGH AVE.	<input type="checkbox"/> Add
		TAMPA, FL 33614	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Gaby Fraifer	4701 W. HILLSBOROUGH AVE.	<input checked="" type="checkbox"/> Add
		TAMPA, FL 33614	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

See attached - Articles of Amendment of Gulf Brisas, LLC.

2018 MAY 10 PM 12:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

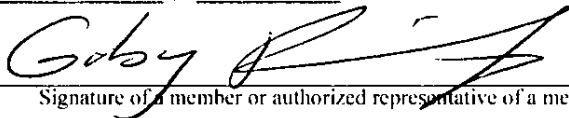
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated May 7, 2018



Signature of a member or authorized representative of a member

Gaby Fraifer

Typed or printed name of signee

**ARTICLES OF AMENDMENT**

**OF**

**GULF BRISAS, LLC**

The name of the limited liability company is Gulf Brisas LLC.

The Articles of Organization of Gulf Brisas, LLC were filed with the Florida Department of State on September 20, 2004, and subsequently amended on September 29, 2004.

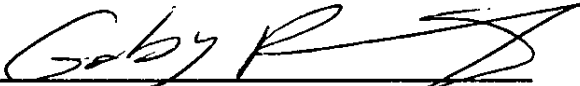
1. Article VII of the Articles of Organization of Gulf Brisas, LLC is hereby amended to read:

**ARTICLE VII  
MANAGEMENT**

Gulf Brisas, LLC is to be manager-managed. Gaby Fraifer shall remain the sole Manager of Gulf Brisas, LLC, and shall retain the title of Manager ("MGR").

2. The forgoing amendment was adopted and approved by consent of all members pursuant to Chapter 605, Florida Statutes.
3. The foregoing amendment shall become effective pursuant to Chapter 605, Florida Statutes.

The foregoing instrument has been executed on this 7th day of May, 2018.

  
\_\_\_\_\_  
Gaby Fraifer, as Manager and authorized  
Representative on behalf of the members of  
Gulf Brisas, LLC.

FILED  
2018 MAY 10 PM 12:56  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA