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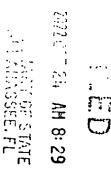
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R. HUNT

COVER LETTER

	ration Secon on of Corp						
elin tezee.	GOV	ERNMENTAL MANAGEMI	ENT SERVICES-CENTRAL FLORIDA	A. LLC			
SUBJECT:	_	Name of Lin	ited Liability Company				
The enclosed Ai	rticles of A	Amendment and fee(s) are sub	omitted for filing.				
Please return all	l correspor	ndence concerning this matter	to the following:				
		KURT ZIMMERMAN					
			Name of Person	_	_	23	
		ZIMMERMAN & ASSOC	CIATES		 . <u>2-</u>	*.0 !**; !	e
Firm/Company			-: -:	1. 1.2.	44.14 14.14		
		2400 E. COMMERCIAL	BLVD., SUITE 820		55V 0 A		
			Address		-ELS	ා ප	
		FORT LAUDERDALE, F	f. 33308		FIATE	AH 8: 29	
			City/State and Zip Code	<u></u>	_		
		KURT@ZIMMERMANLA					
			to be used for future annual report notificat	ion)			
For further infor	rmation co	neerning this matter, please c	all:				
KURT ZIMME	RMAN		954 202-7440 at ()				
	Name of	Person		lephone Numbe	er		
Enclosed is a ch	eck for the	e following amount:					
■ \$25.00 Filin	ng Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Sta	tus &	

Mailing Address: Registration Section Division of Corporations P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GOVERNMENTAL MANAGEMENT SERVICES-CENTRAL FLORIDA, 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 L Florida document numberL05000060907	iability Company were filed on	5/09/2005	and assi	gned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liability company her	<u>re</u> :		
The new name must be distinguishable and contain the v	ords "Limited Liability Company," the de	signation "LLC" or the	abbreviation "L.l	C."
Enter new principal offices address, if applic	able:		1~~3	
(Principal office address MUST BE A STREE	T ADDRESS)		1 m2	
 -			٠ :	•
Enter new mailing address, if applicable:			0 XX 0	;-T1
•			<u>Maria</u> ==	
(Mailing address MAY BE A POST OFFICE	<u></u>		8 29 SIMIE E.FL	
B. If amending the registered agent and/or i agent and/or the new registered office addre		cords, <u>enter the na</u>	me of the new	registe
Name of New Registered Agent:	KURT ZIMMERMAN		=-	
New Registered Office Address:	2400 E. COMMERCIAL BLVD.,	SUITE 820		
	Enter Flori	da street address		
	FORT LAUDERDALE	, Florida	33308	
	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
			🗀 Add
			□Remove
			□Change
			Remove
			Change 7
			Remove AH 8Add COP STATE AND SEE TATE
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			Remove
			□Change

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	Dated SEPTEMBER 12	2022			
KURT ZIMMERMAN			sentative of a member		

Filing Fee: \$25.00