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COVER LETTER

	gistration Sect vision of Corp		*	. ,
eudirær.		MANAGEMENT, LLC		
SUBJECT:		Name of Lim	ited Liability Company	
The enclose	d Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	n all correspond	dence concerning this matter	to the following:	
		RICHARD BECKISH, ES	Q.	
			Name of Person	
		GULFWIND MANAGEM	IENT, LLC	
			Firm/Company	
		997 SOUTH PALAFOX S	TREET, SECOND FLOOR	
			Address	
		PENSACOLA, FL 32502		
			City/State and Zip Code	
		RBECKISH@MSGOFLA.		
		E-mail address: (1	to be used for future annual report not	ification)
For further i	nformation cor	ncerning this matter, please ca	all:	
ARTHUR I	FLETCHER		850 316-4292 at ()	
	Name of I	Person	Area Code Daytin	ne 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

GULFWIND MANAGEMENT, I				
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appears Liability Company)	on our records.)	
The Articles of Organization for this Limited I Florida document number L05000114935	iability Company	were filed on 12/0)1/2005	and assigned
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company her	<u>'e</u> :	
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the des	signation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		997 SOUTH PALAFOX STREET		
(Principal office address MUST BE A STREET ADDRESS)		SECOND FLOOR		
		PENSACOLA, F	L 32502	
Enter new mailing address, if applicable:		997 SOUTH PAI	LAFOX STREET	
(Mailing address MAY BE A POST OFFICE	BOX)	SECOND FLOO	R	
		PENSACOLA, FL 32502		
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:		<u>e</u> :	our records, <u>enter t</u>	he name tof the new
•	007 SOLITH B	AL AEOV STREET		3
New Registered Office Address:	331 300 I ft F	997 SOUTH PALAFOX STREET Enter Florida street address		التا ق
	PENSACOLA		, Florida ³²⁵⁰	02 v
		City	, 1 101104	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 beceby confirm that the limited liability company has been notified in writing of this change.

If Changing Legistered 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>	Address	Type of Action
MGR	LUCIAN DANCAESCU	18 VIA DE LUNA DRIVE, PH03	□ Add
		PENSACOLA, FL 32561	■ Remove
			Change
AMBR	ALEXANDER DANCAESCU	112 MATAMOROS DR	
		PENSACOLA BEACH FL 32561	■ Remove
			□ Change
MGR	JOHN D. LEVITAN, SR	997 SOUTH PALAFOX STREET	≡ Add
		PENSACOLA, FL 32502	Remove
			Change
MGR	ALEXANDER COVER, III	997 SOUTH PALAFOX STREET	■ Aḍḍ
		PENSACOLA, FL 32502	
			Change
			Add 99
			: or control of the
			Change
			Add
			Remove
			Change

	her information, enter change(s)			
		1974		
			-	TAR 27 II
				9:5
				<u>.</u>
Note: If the date inse	ter than the date of filing: add, the date must be specific and cannot be red in this block does not meet the appearance on the Department of State's record	oplicable statutory filing requ	(optional) an 90 days after filing.) Pursi uirements, this date will n	oant to 605.0207 (3)(b) of be listed as the
	s a delayed effective date, but ter the record is filed.	t not an effective time,	, at 12:01 a.m. on th	ne earlier of:
Dated MARCH 23	2017			
	Signature of a member or	authorized representative of a n	member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00