(Re	questor's Name)	
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COVER LETTER

TO:

Registration Section Division of Corporations

C.				
Name of Lim	ited Liability Company			
Amendment and fec(s) are sub	mitted for filing.			
ndence concerning this matter	to the following:			
Sarah Gavlak				
	Name of Person			
Gavlak L.L.C.				
	Firm/Company			
340 Royal Poinciana Way,	Suite M334			
 _	Address			
Palm Beach, FL 33480				
	City/State and Zip Code			
jfservice@jonesfoster.com				
E-mail address: (to be used for future annual report no	tification)		
ncerning this matter, please co	all:			
	561 833-0583			
Person		me Telephone Number		
e following amount:				
☐ \$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)		
<u>:</u> ection	Street Address: Registration Se	ection		
orporations	Division of Corporations			
7 I 32314	The Centre of	Tallahassee		
	Name of Lim Amendment and fee(s) are sub indence concerning this matter Sarah Gavlak Gavlak L.L.C. 340 Royal Poinciana Way, Palm Beach, FL 33480 jfservice@jonesfoster.com E-mail address: (oncerning this matter, please concerning this matter	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Sarah Gavlak		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our recor Liability Company)	<u>ds.</u>)			
The Articles of Organization for this Limited Liability Company Florida document number L06000007332	were filed on 1/23/2006	and assigned			
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company here:				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLG	C" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	340 Royal Poinciana Way				
(Principal office address MUST BE A STREET ADDRESS)	Suite M334	2020 SEC			
	Palm Beach, FL 33480				
Enter new mailing address, if applicable:	340 Royal Poinciana Way	-3 PI			
(Mailing address MAY BE A POST OFFICE BOX)	Suite M334	E.S.			
	Palm Beach, FL 33490	7 <u>8</u> 0			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, <u>enter</u>	the name of the new regist			
New registered office reducess.	Enter Florida street address				
	, Florida				
	City	Zip Code			
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	performance of my duties, a	nd I am familiar with and			

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
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			□Remove
			□Add
			□Remove
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ffective date, if other than th	e date of filin	g:			(onti	onal)		
Affective date, if other than the an effective date is listed, the date in Mote: If the date inserted in this listed.	ust be specific an	d cannot be prior	o date of filing or	more than 90 d	ays after	r filing.)	Pursuant	to 605.0207
locument's effective date on the			ore statutory in	ing requireme	ins, en	s date w	in not	oc fisted as
record specifies a delayed effect	ive date, but no	t an effective tir	ne, at 12:01 a.r	n. on the earlie	er of: (b) The	90th da	y after the
d is filed.								
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