

206000014343

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

sgn

Office Use Only



600300659446

06/23/17--01015--016 **25.00

FILED
17 AUG -3 PM 4:16
DIVISION OF CORPORATIONS

O SIMMONS
AUG 07 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 28, 2017

WAYNE GOULD
8201 PETERS RD
PLANTATION, FL 33324

SUBJECT: GSM MARKET, LLC
Ref. Number: L16000014343

We have received your document for GSM MARKET, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia I Simmons
Regulatory Specialist II

Letter Number: 917A00013092

RECEIVED
2017 AUG -3 PM 12:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GSM MARKET, LLC

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:

Wayne A. Gould

Name of Person

Wayne A. Gould CPA

Firm/Company

8201 Peters Rd.

Address

Plantation, FL 33324

City/State and Zip Code

waygould@gmail.com

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

For further information concerning this matter, please call:

Wayne A. Gould

954

851-3000

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

The 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**

GSM Market, 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 Liability Company were filed on May 18, 2017 and assigned
Florida document number L06000014343.

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

A

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:

N/A

Principal office address MUST BE A STREET ADDRESS

Enter new mailing address, if applicable:

N/A

Mailing address MAY BE A POST OFFICE BOX

FILED
17 AUG -3 PM 4:16
DIVISION OF CORPORATIONS

**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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

N/A

, Florida

N/A

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 Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added
removed from our records:

GR = Manager
MBR = Authorized Member

<u>title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GR	Elliot Cohen	21000 NE 24th Avenue	<input checked="" type="checkbox"/> Add
		Miami FL 33180	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 AUG - 3 PM 4/16
DIVISION OF CORPORATIONS
FILED

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

Blank lined area for amendments.

17 AUG -3 PM 4:16
DIVISION OF CORPORATIONS

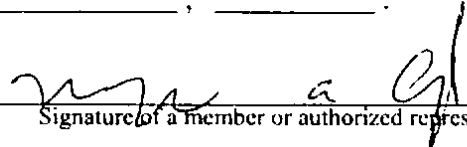
FILED

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.

the record specifies a delayed effective date, but not an effective time, at 12:01 a.m! on the earlier of:
a) The 90th day after the record is filed.

Dated June 19, 2017



Signature of a member or authorized representative of a member

Wayne Gould

Typed or printed name of signee