## L06000023534

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
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(Document Number)				
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SECRETARY IF STATE
ALL ANY SEEF FLORING

T. HAMPTON
DEC - 2 2008

**EXAMINER** 

## COVER LETTER

Registration Section
Division of Corporations TO:

SUBJECT: Yeinsterement G.E.M. mousties (Name of Limited Liability Company)

The enclosed Articles of Amendment and fcc(s) are submitted for filing,

Please return all correspondence concerning this matter to the following:

American Business

(Final Company)

426 Sau 4th St #8

(Address) Miami, FL 33130 (City/State and Zip Code)

For further information concerning this matter, please call:

at (305) 410 - 4465 (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:

STREET/COURTER ABOR Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, F1. 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 5, 2008

GEM INDUSTRIES, LLC 470 SW 87TH CT MIAMI, FL 33174

SUBJECT: G.E.M. INDUSTRIES LLC

Ref. Number: L06000023534

SECRETARY OF STATE TALLAHASSEE, FLORIDA

08 DEC -2 PM 4: 10

We have received your document for G.E.M. INDUSTRIES LLC and check(s) totaling \$227.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$50.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 008A00056262

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co	innany as it now appears on oar records.) ited Liability Company)
	apany were filed on 03/06/2006 and assigned 34
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	
The new name must be distinguishable and end with the words ""L.L.C."	Parts LLC "Limited Liability Company," (he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES.	<u>(SS)</u>
	<del></del>
Enter new mailing address, if applicable:	
(Mailing address MAY RE A POST OF PICE BOX)	-
B. If amending the registered agent and/or registere registered agent and/or the new registered office address	ed office address on our records, <u>enter the name of the new</u> is <u>here</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	(Enter Florida street address)
<del></del>	(City) (Zin Code)
	(City) (Zip Code)

New Revistered 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 608, 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, Stunsture of New Registered Agent)

Page 1 of 2

SECRETARY OF STATE

MGR = Manager

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

	Name	Address	Type of Action
		·	Add Remove
			Add Remove
			. <b></b>
	. <u></u>		Add Remove
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lf amen	ding any other information, enter char	nge(x) here: (Attach additional sheets, if nec	ressarv.)
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		2011	
 ed <b>&gt;</b>	member 16x B	<u>00</u> %	

Page 2 of 2 Filing Fee: \$25.00

SECRETARY OF STATE