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COVER LETTER

*TO: Registration Section Division of Corporations

.... GC Service, 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:

Jason Green

Name of Person

GC Service, LLC

Firm/Company

8133 Champions Gate Circle, #1201

Address

Champions Gate, FL 33896

City/State and Zip Code

gcservicefl@gmail.com

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

For further information concerning this matter, please call:

Jason Green

_. 863 221-1392

Name of Person

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)

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**

GC Service, LLC		
(Name of the Limited Liability Compa (A Florida Limited I.	ny as it now appears on our records.) Jiability Company)	
the Articles of Organization for this Limited Liability Company were filed on 06/06/2006 and assigned		
Florida document number L06000058048		
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 end with the words "Limi "L.L.C."	ited Liability Company," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applicable:	8133 Champions Circle, #1201	
(Principal office address MUST BE A STREET ADDRESS)	Champions Gate, FL 33896	
	<u> </u>	E Tr
Enter new mailing address, if applicable:	8133 Champions Circle, #1201	42 P
(Mailing address MAY BE A POST OFFICE BOX)	Champions Gate, FL 33896	
	3.	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Florida	
	City	Tip 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 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, Signature of New Registered Agent

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:

MGR = Manager MGRM = Managing Member

<u> Title</u>	<u>Name</u>	<u>Address</u> <u>T</u>	ype of Action
MGR/Pres	Chelsea Miller-Green	8133 Champions Gate Circle, #1201	Add
		Champions Gate, FL 33896	Remove
			-
<u></u>			Add
			Remove
			Add
		· · · · · · · · · · · · · · · · · · ·	Remove
			Add
			Remove
		Signal Si	Add
		Low State	Remove
			_
			Add
			Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)					
·					
7/19	2013				
	Soudston				
<u> </u>	signature of a member or authorized representative of a member				
Jason Green	<u> </u>				
	Typed or printed name of signee				

Page 3 of 3

Filing Fee: \$25.00

