## 157000040244

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(Document Number)	—
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G. MCLEOD

JUN - 2 2009

**EXAMINER** 



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## **COVER LETTER**

TO:

TO:	Registration S Division of Co			
SUBJE	CT:	Gio-M	lar Real, LLC	
	<u></u>	Name of Lim	ited Liability Company	
The end	losed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please r	eturn all corresp	ondence concerning this matter	r to the following:	
			Antonio L Roca	
			Name of Person	•
			Roca Gonzalez, PA	
			Firm/Company	
2601		2601 Soi	uth Bayshore Drive, Suite	600
			Address	<del></del>
			Miami, FL 33133	
		•	City/State and Zip Code	
		E mail addraga	ckahl@rgpa.com to be used for future annual report no	*iffaction
For furt	her information	concerning this matter, please of		(incation)
	An	itonio L Roca	at (_305 )	859-6050
	Name o	of Person	Area Code & Dayti	ime Telephone Number
Enclose	d is a check for t	he following amount:		
<b>√</b> \$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclos	Certificate of Status &  Certified Copy (additional copy is enclosed)
	Regist Divisio P.O. B	LING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COUI Registration Sect Division of Corp Clifton Building 2661 Executive ( Tallahassee, FL 3	oorations Center Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gio-Mar Real,				
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears Company)	on our records.)		
The Articles of Organization for this Limited Liability Company were f	iled on	4/13/2007	ond assigned	
Florida document numberL07000040244				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability co	ompany here	:		
The new name must be distinguishable and end with the words "Limited Lia" "L.L.C."	bility Compan	y," the designation "L	LC" or the a	abbreviation
Enter new principal offices address, if applicable:				0
(Principal office address MUST BE A STREET ADDRESS)			09	SEV
	<del></del>		<u></u>	9#_
			1	
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
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			Ų,	<u></u>
B. If amending the registered agent and/or registered office acresistered agent and/or the new registered office address here:	ldress on ou	r records, enter t	he name o	f the nev
registered agent and/or the new registered office address here.				
Name of New Registered Agent:				
New Registered Office Address:				
	Ente	r Florida street add	ress	
		, Florida		
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 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>Address</u> Type of Action Title Name MGR Mariani, Giorgio 9 Island Avenue, #2408 Miami Beach, FL 33139 □ Add Remove MGR Giorgio Mariani 2601 South Bayshore Drive **▼** Add Suite 600 Remove Miami, FL 33133 ∏ Add Remove \_\_ Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Giorgio Mariani

Typed or printed name of signee Page 2 of 2

Filing Fee: \$25.00