

DEC 29/2021 WED 01:25 PM

FAX NO

2:30 PM

12/29/21 12:12 PM

Division of Corporations

# Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

((H21000471447 3)))

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000471447 3)))



H210004714473ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6393

From: Account Name : GALBUT WALTERS AND ASSOCIATES, LLP  
Account Number : I20200000166  
Phone : (305)331-0644  
Fax Number : (786)427-6212

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: Bcook@galbutwalters.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
GR REAL ESTATE PROPERTY INVESTMENTS, LLC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2021 DEC 29 PM 12:33

Electronic Filing Menu

Corporate Filing Menu

Help

2021 DEC 29 PM 2:00  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2021 DEC 29 PM 2:00

FILED

((H21000471447 3)))

## COVER LETTER

TO: Registration Section  
Division of Corporations

(((H21000471447 3)))

SUBJECT: GR REAL ESTATE PROPERTY INVESTMENTS, 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:

Bradley Cook, Esq.

Name of Person

Galbut, Walters, & Associates, LLP

Firm/Company

4770 Biscayne Blvd., Suite 1400

Address

Miami, FL 33137

City/State and Zip Code

Bcook@GalbutWalters.com

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

For further information concerning this matter, please call:

Bradley Cook

786 245-2312  
at ( )

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)

☐ \$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 Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

(((H21000471447 3)))

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION (((H21000471447 3)))  
OF**

GR REAL ESTATE PROPERTY INVESTMENTS, 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 12/30/2011 and assigned  
Florida document number L07000041994

This amendment is submitted to amend the following:

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

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: /

4770 Biscayne Blvd., Suite 1400

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL 33137

Enter new mailing address, if applicable:

4770 Biscayne Blvd., Suite 1400

(Mailing address MAY BE A POST OFFICE BOX)

Miami, FL 33137

**B. 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:

Abraham A. Galbut

New Registered Office Address:

4770 Biscayne Blvd., Suite 1400

Enter Florida street address

Miami

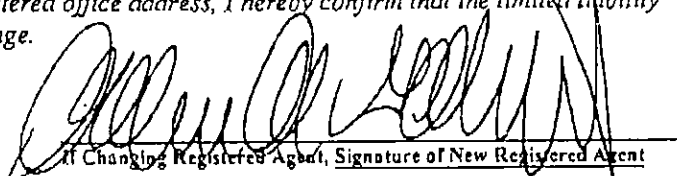
Florida 33137

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

(((H21000471447 3)))

FILED  
2021 DEC 29 PM 2:00  
STATE OF FLORIDA  
CLERK OF THE COURT

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

((H21000471447 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	RESNICK, ANDREW	2700 BAY AVE	<input type="checkbox"/> Add
		MIAMI BEACH, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
PRES	SHEITELMAN, MICHAEL	2200 BISCAYNE BLVD	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33137	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP	GALBUT, MARISA	2200 BISCAYNE BLVD	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33137	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
VP/SEC	ROZSANSKY, BINYOMIN	2200 BISCAYNE BLVD	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33137	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
TRES	AGUIAR, DAYAMI	2200 BISCAYNE BLVD	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33137	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

((H21000471447 3)))

((H21000471447 3)))

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

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

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.

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

Dated

Signature of a member or authorized representative of a member

Abraham A. Galbut

Typed or printed name of signee

FILED  
2021 DEC 29 PM 2:00  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

((H21000471447 3)))

**Filing Fee: \$25.00**