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COVER LETTER

TO:	Registration Section Division of Corporation	ons		
SUBJE		TE SALES & MARKETI	NG LLC	
SUBJE	UI:	Name of Limite	ed Liability Company	
The enc	losed Articles of Amenc	lment and fee(s) are subm	itted for filing.	
		concerning this matter to	_	
	PA	BLO BUTTICE		
			Name of Person	
	GZ	ZI REAL ESTATE SALES	S & MARKETING LLC	
	_	<u> </u>	Finn/Company	
	10	90 KANE CONCOURSE	SUITE 207	
			Address	
	BA	AY HARBOR ISLAND FI	L 33154	
		OLOGCZIREAL TV CON	City/State and Zip Code	
	ra	BLO@GZIREALTY.COM E-mail address: (to	be used for future annual report notification)	
For furt	her information concern	ing this matter, please call	l:	
PABLO	BUTTICE		305 864-5330 or 305-986-026	3
	Name of Persor	1	at ()	
,	d is a check for the follo	_		
X \$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 A Registration S Division of C P.O. Box 632 Tallahassee, F	section orporations 7	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

GZI REAL ESTATE SALES & MARKETING LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

\	(A Florida Limited Liability Company)	, , , , , , , , , , , , , , , , , , ,
The Articles of Organization for this Limited L Florida document number <u>L0700043</u>		and assigned
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name of	f the limited liability company here	:
The new name must be distinguishable and contain the v	words "Limited Liability Company." the design	nation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
Enter new mailing address, if applicable:		-
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
	Manage of the state of the stat	
B. If amending the registered agent and registered agent and/or the new registered o		ur records, <u>enter the name of the new</u>
Name of New Registered Agent:	PABLO BUTTICE	
New Registered Office Address:	1090 KANE CONCOURSE SUITE	207
	Enter Florida	street uddress
	BAY HARBOR ISLAND	, Florida 33154 Zip Code
·	City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	
I hereby accept the appointment as registere provisions of all statutes relative to the prop- accept the obligations of my position as reg- being filed to merely reflect a change in the company has been notified in writing of this	oer and complete performance of my istered agent as provided for in Cha registered office address. I hereby o	duties, and I am familiar with and apter 605, F.S. Or, if this document is
	ICC)	GO
	If Changing Registered Agent	t, Signature of New Registered Agent

Page 1 of 3

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

MGR = Manager

AMBR = Authorized Member **Type of Action** <u>Title</u> <u>Name</u> **Address** PABLO BUTTICE (Munager) MR. 1090 KANE CONCOURSE SUITI ☐ Change _□ Add □ Remove _□ Change _□ Add ☐ Remove _□ Change _□ Add □ Remove _ Change _□ ∧dd ☐ Remove Change

	E RESIGNING AND PABL	.o bottleb wibb bb		

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	specific and cannot be prior to	date of filing or more than 9	(optional) 0 days after filing.) I	Pursuant to 605.02
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Filing Fee: \$25.00