Division of Corporations Electronic Filing Cover Sheet

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.

(((H17000125527 3)))



H170001255273ABC/

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)617-6383

From:

Account Name : GBS CONSULTANTS, INC.

Account Number : I20050000012 Phone : (954)659-8835 Fax Number : (954)301-0417

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

Email Address: jbeatriz_28@hotmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SAN REMO INVESTMENTS 778, LLC

0
1
03
\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

MAY 0 9 2017

Y SULKER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SAN KEMO INVESTMENTS //8, LLC			
(A Florida	Company as it now appears on or Limited Liability Company)	ir records.)	
The Articles of Organization for this Limited Liability Co	ompany were filed on 05/17/20	ond assigned	
Florida document number 1.07000052667	w'		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here:		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	SSS)		
-		· · · · · · · · · · · · · · · · · · ·	
Enter new mailing address, if applicable:		2	
(Matting address MAY BE A POST OFFICE BOX)		32.0	
(MINIAN SAIDLEN MAT DE AT OST OFFICE BOA)		607	
	-7. 1	<u> </u>	
B. If amending the registered agent and/or regist	ered office address on our	records, enter the name of the new	
registered agent and/or the new registered office addr			
Name of New Registered Agent:		100	
New Registered Office Address:			
	Emer Florida stra	et address	
	``	, Florida	
	Chy	ZIP Code	
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and co accept the obligations of my position as registered agbeing filed to merely reflect a change in the registered company has been notified in writing of this change.	mplete performance of my di ent as provided for in Chapt	aties, and I am famillar with and er 605, F.S. Or, if this document is	
•			
	If Changing Registered Agent, §	gnature 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 it	being added
or removed from our records:		

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MBR	PALMA, OMAR S	3350 SW 148TH AVE. SUITE 120	D Add
		MIRAMAR, FL 33027	☐ Remove
		**************************************	☐ Change
			☐ Add
		***************************************	Remove
			☐ Change
			D'Add ≺
			Remove
	,		Change
			Sab Add
			□ Remove
			□ Change
		Age of the second secon	
			☐ Remove
			Change
			Add
	16		□ Remove
			Change

				-
			······································	
		,		
		<u> </u>		-
*				_
				_
				~
	······································			_
		·		**
			2* Pr 2	
			- (HE)	- 22.7
		-,	<u> </u>	
				- 20
,			<u> </u>	_ <u>[]</u>
ctive date, if other than the date of filing:			(optional)	tro.
effective date is listed, the date must be specific and ca g: If the date inserted in this block does not mee ument's effective date on the Department of Stat	nnot be prior to date out the applicable sta	of filing or more than 90 days	s after filing.) Pursuant to 6	05.020 sted a
record specifies a delayed effective dat ne 90th day after the record is filed.	e, but not an e	ffective time, at 12:	01 a.m. on the ear	lier c
05-05-2017	Jane Pa	he		
Signature of a met	uber or authorized re	presentative of a member		
		PALMA	_	

Page 3 of 3