Florida Department of State

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.

(((H14000212467 3)))



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 : BRENNAN, MANNA AND DIAMOND,

Account Number : 120050000098

Phone : (239) 992-6578

Fax Number

: (239)992-9328

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN G-5 INVESTMENT GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

T. Brich SEP 1 1 2014

Electronic Filing Menu

Corporate Filing Menu

Help

(((H140002124673)))

COVER LETTER

TO: Registration Section Division of Corporations

region. G-5 Investment Group, 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:

Scott W. Duval

Name of Person

Brennan, Manna & Diamond, PL

Firm/Company

3301 Bonita Beach Rd. #100

Addres

Bonita Springs, FL 34134

City/State and Zip Code

swduval@bmdpl.com

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

For further information concerning this matter; please call:

Scott W. Duval

.,,239、992-6578

Name of Person

Area Code

Daytime Telephone Number

Enclused is a check for the following amount:

S25.00 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/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallabassee, FL 32301

(((H140002124673)))

(((H14000212467 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G-5 investment Group,					_	
(<u>Name of the Limitu</u> (d Liability Compar A Florida Limited L	ny as it now appears on our recornability Company)	<u>ds.</u>)			
The Articles of Organization for this Limited Lia Florida document number L0700062928	bility Company		mayoran da	_ and a	assigno	ed .
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liabi	lity company here;				
			=	4		
The new name must be distinguishable and end with the w	ords "Limited Liabi	ity Compuny," the designation "Li	.C" or the abbin	- Arion	"5.L. C	, n
Enter new principal offices address, if applica	ble:				SEF	
(Principal office address MUST BE A STREET	ADDRESS)			32	_	Witnesday
			0.00	; <	—	1
•			-1	ا مصص	H	711
Enter new mailing address, if applicable:		8660 College Parkv	/av ⊆	TS.	<u>. </u>	
(Mulling address MAY BE A POST OFFICE B	0 X1	Suite 80	Ė	<u> </u>	5	
	<u> </u>	Fort Myers, FL 339	1 9			
		1 3 (1) (1) (1)				
B. If amending the registered agent and/o registered agent and/or the new registered offi	ce address here	:		nam	e of t	he new
Name of New Registered Agent:	Brennan, Manna & Diamond, PL					
New Registored Office Address:	3301 Bonit	a Beach Rd #100				
		Enter Florida street uddre				
	Bonita Spri	ngs _{. Fi}	orida <u>341</u> :	34		
		City		Zip Coc	lo	<u></u>
New Registered Agent's Signature, if changing Re	gistered Agent:					
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this cl	and complete pered agent as pegistered office a hange.	performance of my duties, a covided for in Chapter 605, address, I hereby confirm the	nd I am fam F.S. Or, if t at the limite	iliar y his do ed liab	vith an cumen vility	nd
	Page 1	ting Registered Agent, <u>Signature</u> of 3	OI LICH LACEISE	er an W	<u>स्था</u>	

(((H14000212467 3)))

_□ Remove

(((H14000212467 3)))

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member Title Name Address Type of Action Kamila Sample MGR P.O. Box 61679 □ Add Ft. Myers, FL 33906 Remove Mary Lust 8660 College Parkway MGR **■** Add Unit 80 □ Remove Ft. Myers, FL 33919 □ Add □ Remove

Page 2 of 3
(((H14000212467 3)))

and the second second	(((H14000212467 3)))
mending any other information, ente.	er change(s) here: (Attach additional sheets, if necessar
	www.
ective date, if other than the date of fil	ling: (optional
effective date must be specific, cannot be prior to date this document is filed by the Florida Depart	o date of receipt or filed date and cannot be more than 90 days after
September 9	2014
september 9	
\mathcal{O} .	and control
Signature o	of a member or authorized representative of a member
Mary Lust	
IVILLI y EUSt	Typed or printed name of signee

14 SEP 10 PH 4: 45
SECRETARY OF STATE

Page 3 of 3

Filing Fee: \$25.00