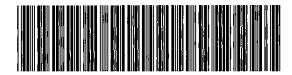
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(Requestor's Name)
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OCT 22 2008

EXAMINER

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10/20/08--01049--003 **25.00

COVER LETTER

TO:

Registration Section
Division of Corporations

Registration Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

SUBJECT: Expres	s Production, LLC (Name of Lim	ited Liability Company)			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	James A. Forsythe, Reg				
	,	(Name of Person)			
	Express Production, LLC	,			
	· · ·	(Firm/Company)			
			=1,0	20	
1164 E. Oakland Park Blvd #306			<u> </u>	7008 OCT	-17
		(Address)	至四	CI (-
Oakland Park, FL 33334			ARY SSI	21	-
		(City/State and Zip Code)	- Hop	H	
For further information of	concerning this matter, please c	all:	STATE	AH 10: 53	, mo
James A Forsythe		at (954) 903-4780			
(Name of Person)		(Area Code & Daytime Telephone Number)			
Enclosed is a check for t	he 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 St Certified Copy (additional copy	atus &	osed)
MAII	INC ADDDESS.	STDEET/COUDIED	ANNDFEC.		

Registration Section

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Express Production, LLC				
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our rec a Limited Liability Company)	ords.)		
The Articles of Organization for this Limited Liability	Company were filed on 3/26/2007	and assigned		
Florida document number 607000032174 40700	100.84147			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability company here:			
GBGC, LLC		TALE TALE		
The new name must be distinguishable and end with the w"L.L.C."	vords "Limited Liability Company," the desi	ignation TC" on the abbreviation		
Enter new principal offices address, if applicable:		- ××××××××××××××××××××××××××××××××××××		
(Principal office address MUST BE A STREET ADI	DRESS)	F.F. ST.		
		ORDE S		
		3		
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or reg registered agent and/or the new registered office ad		s, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:				
	(Enter Florida street address)			
<u> </u>	, 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.

H 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 **Address Title** <u>Name</u> **Type of Action** ☐ Add ☐ Remove Add Remove Add Remove □ Add Remove $\frac{5}{3}$ D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 15 2008, Signature of a member or authorized representative of a member James A. Forsythe, Registered Agent Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00