## L080000 18300

(Re	equestor's Name)	
(Ac	ldress)	
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(Ac	idress)	
(Ci	ty/State/Zip/Phone #	)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
	_	
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T. HAMPTON

FEB 2 9 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Gorilla Gate Company, LLC		
	nited Liability Company)	
The enclosed Articles of Amendment and fee(s) are su Please return all correspondence concerning this matte	-	
Jose R. Soto	(Name of Person)	<del></del>
Gorilla Gate Compa	my LLC	
Oomia Oate Oompa	(Firm/Company)	<del>- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1</del>
1930 Deanna Dr.		
	(Address)	
Apopka, Florida 327		<del> </del>
	(City/State and Zip Code)	
For further information concerning this matter, please	call:	
Jose R. Soto	at (407 ) 814-9641	
(Name of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check for the following amount:		
\$25.00 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:	STREET/COURIER	ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

08 FEB 28 PM 2: 04

	OF	S OR
Gorilla Gate Company, LLC ( <u>Name of the Limited L</u>	iability Company as it now appears on our records.)	STATE ORATIONS
· (A F	lorida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on 2/20/2008	and assigned
Florida document number <u>L08000018300</u>	·	
This amendment is submitted to amend the follow	ring:	
A. If amending name, <u>enter the new name of t</u>	he limited liability company here:	
The new name must be distinguishable and end with t "L.L.C."	the words "Limited Liability Company," the designation "I	LC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter t</u> e <u>e address here</u> :	the name of the new
Name of New Registered Agent:		
New Registered Office Address:	(Enter Florida street ad	dress)
	, Florida	
	(City)	(Tin 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.

(If Changing Registered Agent, Signature of New Registered Agent)

If 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 **Title** <u>Name</u> <u>Address</u> **Type of Action MGRM** Claudio Afanador 705 Laurel way **☑** Add Casselberry, Florida 32707 Remove Add Remove Add Remove Add Remove Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 2 February 2008 Signature of a member or authorized representative of a member Claudio Afanador Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00