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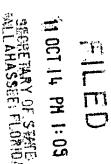
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J. BRYAN

OCT 17 2011

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	Gandy	Harbor I, LLC		
		ited Liability Company		
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	ondence concerning this matte	r to the following:		
		Brian A. Leung		
		Name of Person	MOCT IN PAIN OF PURPLE OF	
	Holcomb & Leung, P.A.			
	Firm/Company			
	3203 W. Cypress St.			
		Address		
		Tampa, FL 33607		
		City/State and Zip Code		
	brian	leung@holcomblaw.com to be used for future annual report notifica		
	E-mail address: (to be used for future annual report notifica	ition)	
For further information	concerning this matter, please	call:		
Br	ian A. Leung	at (813) 25	58-5835	
	of Person	Area Code & Daytime T		
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)	S60.00 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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Gandy Har	bor I, LLC			
(Name of the Limite	A Florida Limited I	ny as it now appear Liability Company)	s on our_records.)		
The Articles of Organization for this Limited I	Liability Company	were filed on	05/16/2008	and assigned	
Florida document numberL0800004	9187			,	
This amendment is submitted to amend the fol A. If amending name, enter the new name of	•	oility company here	<u>.</u>	I C'artis abereviation	
The new name must be distinguishable and end w 'L.L.C."	ith the words "Lim	ited Liability Compa	ny," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applicable:		280 Gulf Blvd		55	
(Principal office address MUST BE A STRE	ET ADDRESS)	Bellaire Shore	es, FL 33786		
Enter new mailing address, if applicable:		280 Gulf Blvd.			
(Mailing address MAY BE A POST OFFICE BOX)		Bellaire Shore	es, FL 33786		
B. If amending the registered agent and registered agent and/or the new registered o	•		ur records, <u>enter t</u>	he name of the nev	
Name of New Registered Agent:	Brian A. Leung				
New Registered Office Address:	3203 W. Cy	'	er Florida street add	race	
			er Pioriau sireei aaa		
		Tampa, City	, Florida	33607 Zip Code	
New Projectored Asserts Signature if shoulding	5	Cuy		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.

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

<u>Title</u>	<u>Name</u>	Address	Type of Action			
MGR	Ronald Roseman	280 Gulf Blvd. Bellaire Shores, FL 33786				
<u>MGR</u>	Edward Curtain	9513 N. Trask St. Tampa, FL 33624	Add Remove			
			Add Remove			
			Add Remove			
<u></u>			Add Remove			
			Add Remove			
D. If amendi	ng any other information, enter change	(s) here: (Attach additional sheets, if necessary.)				
		A HASSET:	TOCTIL PH			
Dated	September 21 , 201	1 .	平 -: 03			
-	Signature of a member of	or authorized representative of a member				
		rian A. Leung				
Typed or printed name of signee						

Page 2 of 2

Filing Fee: \$25.00