L080000 86708

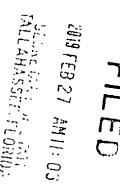
| (Requestor's Name) |
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JLS 19

February 24, 2019

To whom it may concern, My Daytime phone number is: (305) 297-8586 My mailing address is: 3201 NE 183rd street. Apt 1603. Aventura, FL, 33160



COVER LETTER

| то: | Registration Sec Division of Cor | | | |
|-----------------|-------------------------------------|--|---|---|
| | GVG of Mi | ami LLC | | |
| SUBJI | ECT: | Name of Lim | nited Liability Company | |
| The en | closed Articles of . | Amendment and fee(s) are sub | omitted for filing. | |
| Please | return all correspo | ndence concerning this matter | to the following: | |
| | | CHARLES GOLDSMITH | | |
| | | | Name of Person | |
| | | 20900 WEST DIXIE HIGH | Firm/Company WAY | |
| | | AVENTURA, FL 33180 | Address | |
| | | CLGMDLPE@AOL.COM | City/State and Zip Code | |
| | | E-mail address: (| to be used for future annual report notif | leation) |
| For fur | ther information ec | oncerning this matter, please co | all: | |
| JASON GOLDSMITH | | | 305 2978586 | |
| | Name of | Person | at () Area Code Daytime | : Telephone Number |
| Enclos | ed is a check for th | e following amount: | | |
| □ \$2: | 5.00 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 Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Compa (A Florida Limited) | iny as it now appears on our records.) Liability Company) | | | | | |
|--|---|--|--|--|--|--|
| The Articles of Organization for this Limited Liability Company Florida document number L08000086708 | were filed on 09/11/08 and assigne | | | | | |
| This amendment is submitted to amend the following: | | | | | | |
| A. If amending name, enter the new name of the limited liab | ility company here: | | | | | |
| DR G SQUARED LLC | | | | | | |
| The new name must be distinguishable and contain the words "Limited Liabi | lity Company," the designation "LLC" or the abbreviation "L.L.C." | | | | | |
| Enter new principal offices address, if applicable: | 4380 OAKES ROAD | | | | | |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | SUITE 807 | | | | | |
| | DAVIE, FL 33314 | | | | | |
| Enter new mailing address, if applicable: (Mailing address MAY RE 4 POST OFFICE BOX) | C/0 HIXSON, MARIN, DESANCTIS AND CO. 20900 WEST DIXIE HIGHWAY | | | | | |
| Initial document number L08000086708 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liabor of SQUARED LLC The new name must be distinguishable and contain the words "Limited Liabor of the new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) | AVENTURA, FL 33180 | | | | | |
| - | Enter Florida street address | | | | | |
| | . Florida | | | | | |
| | Cin Cork | | | | | |

New Registered Agent's Signature, if changing Registered Agent:

GVG OF MIAMILLO

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager

| Ā | MBR | = , | Aut | hor | ized | M | lem | ber |
|---|------------|-----|-----|-----|------|---|-----|-----|
|---|------------|-----|-----|-----|------|---|-----|-----|

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
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| Effective date, if | other than the listed, the date must | late of filing: be specific and ea | mnot be prior to a | late of filing or mo | ore than 90 days aft | tio <mark>nal)</mark> critine i Pursuan | t to 605.0207 |
| Note: If the date | inserted in this blo ive date on the De | ek does not mee | et the applicable | | | | |
| document 5 chect | ive date on the rice | partinent or stat | e s records. | | | | |
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| | | Signature of a mer | mber or authoriza | ed representative. | ata manka | / | |
| | | nghatare marine | inite of additions | ed representative | domi | /) | |

Page 3 of 3

Filing Fee: \$25.00

principles. The Parties hereto irrevocably and unconditionally consent to submit to the exclusive jurisdiction of the state and federal courts located in Miami-Dade County. Florida for any actions, suits or proceedings arising out of or relating to this Agreement.

- 4. Counterparts. This Agreement may be executed in counterparts, each of which shall constitute an original and all of which when taken together shall constitute one and the same instrument and shall become effective when counterparts have been signed by each of the parties and delivered to the other parties. PDF or facsimile signatures shall be given the same force and effect as originals.
- 5. Entire Agreement and Amendment. This Agreement contains the entire understanding of the Parties with respect to the subject matter of this Agreement. There are no representations, promises, warranties, covenants or undertakings other than those expressly set forth in or provided for in this Agreement. This Agreement may not be amended, supplemented, or otherwise modified, except by a written agreement executed by all Parties.

WITNESS:

TRANSFEROR:

 $\mathbf{B}_{\mathbf{V}}$

Harold Levy, as Trustee of the Goldsmith

Family Trust

WITNESS:

TRANSFEREE:

Rv

ason Goldsmith, individually

GVG OF MIAMI, LLC

ASSIGNMENT OF MEMBERSHIP INTEREST

FOR VALUE RECEIVED, the receipt and sufficiency of which are hereby acknowledged, the Goldsmith Family Trust, does hereby conveys, assigns and transfers onto Jason Goldsmith, an individual, a 3.158% Membership Interest consisting of 6.0 Membership Units, in GVG of Miami, LLC, free and clear of any and all liens, security interests or encumbrances whatsoever.

Dated as of December __. 2018.

Goldsmith Family Trust

By: Harold Levy Title: Trustee

Jason Goldsmith

Jason Goldsmith