L08 00097534

•								
(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
,								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								

Office Use Only



600155743166

05/12/09--01020--015 **25.00

OS MAY 12 PM 2: 29
SECRETARY OF STATE

S. HAWKES

MAY 1 4 2009

EXAMINER

COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT:		Gemma Due,	LLC				
	N	Name of Limited Liability Company					
The enclosed Art	icles of Amendment and	fee(s) are submitted for fi	ling.				
Please return all o	orrespondence concernin	g this matter to the follow	ving:				
		······	el Fierro				
		Name of Person .					
		Balwant Ch	neema, CPA				
	Firm/Company						
	8301 NW 197th Street						
Address							
	Miami, FL 33015						
	City/State and Zip Code						
	brian@balcpa.com E-mail address: (to be used for future annual report notification)						
			ruture amuai report nou				
For further inforr	nation concerning this ma	itter, piease caii:					
	Brian Del Fierro	at (_	305)	764-1073			
	Name of Person		Area Code & Daytin	ne Telephone Number			
Enclosed is a che	ck for the following amo	unt:					
✓ \$25.00 Filing		e of Status Cert) Filing Fee & ified Copy is enclose	\$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/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, FL 3	on orations enter Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	Gemma D						
(<u>Name of the Limited</u> (A	Liability Compar Florida Limited L	ry as it now appear iability Company)	s on our records.)				
The Articles of Organization for this Limited Li		were filed on	10/16/2008	and assigned			
Florida document numberL08000097	<u>′534</u>						
This amendment is submitted to amend the follo	owing:		1817 1817	3 M			
A. If amending name, enter the new <u>name of</u>	the limited liab	ility company her	2:	No Marie			
The new name must be distinguishable and end wit "L.L.C."	h the words "Limi	ted Liability Compa	ny," the designation "L	LOVer the abbrevious			
Enter new principal offices address, if applic	c/o Balwant Cheema						
(Principal office address MUST BE A STREE	T ADDRESS)	8301 NW 197th Street					
	Miami, FL 33015						
Enter new mailing address, if applicable:	c/o Balwant Cheema						
(Mailing address MAY BE A POST OFFICE	8301 NW 197th Street						
	Miami, FL 33015						
B. If amending the registered agent and/oregistered agent and/or the new registered of	-		ur records, <u>enter t</u>	he name of the new			
Name of New Registered Agent:	Balwant Cheema, CPA						
New Registered Office Address:							
	Enter Florida street address						
		Miami	, Florida	33015			
		City		Zip Code			
New Registered Agent's Signature, if changing I	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, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Title** Name Address **Type of Action MGR** Luciano Ditadi ✓ Add c/o Balwant Cheema 8301 NW 197th Street Remove Miami, FL 33015 Elena Ditadi MGR c/o Balwant Cheema ✓ Add ☐ Remove 8301 NW 197th Street Miami, FL 33015 MGR Luciano Ditadi 2601 South Bayshore Drive Suite 600 Remove Miami, FL 33131 Elena Ditadi MGR Add 2601 South Bayshore Drive √ Remove Suite 600 Miami. FL \prod Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Luciano Ditadi

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00