

L08000115013

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE FLORIDA

JUL 08 2013
D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **GMN LAW GROUP PL**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alex J. Pearlberg

Name of Person

GMN LAW GROUP PL

Firm/Company

7501 NW 4th Street Suite 207A

Address

Plantation, Florida 33317

City/State and Zip Code

apearlberg@amerihopealliance.com

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE FLORIDA

For further information concerning this matter, please call:

Alex J. Pearlberg

Name of Person

at (**877 882-5338**) Ext **830**

Area Code & Daytime Telephone Number

Enclosed is a check for the 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 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**

GMN LAW GROUP PL

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on December 18th, 2008 and assigned Florida document number L08000115013.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter 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)

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CLERK OF STATE
TALLAHASSEE FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: Alex J. Pearlberg

New Registered Office Address: 7501 NW 4th Street, Suite 207A
Enter Florida street address

Plantation, Florida 33317
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.

Alex J. Pearlberg
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

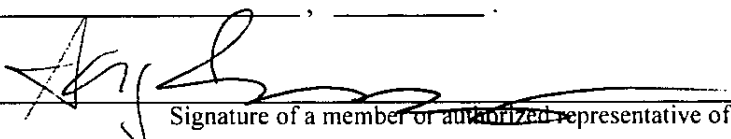
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Alex J. Pearlberg	7501 NW 4th Street	<input checked="" type="checkbox"/> Add
		Suite 207A	<input type="checkbox"/> Remove
		Plantation, Florida 33317	
MGR	Gregory M. Nordt	7501 NW 4th Street	<input type="checkbox"/> Add
		Suite 207A	<input checked="" type="checkbox"/> Remove
		Plantation, Florida 33317	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

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 CLERK OF STATE
 TREASURY
 FLORIDA

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

Alex J. Pearlberg

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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