

L090000003867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

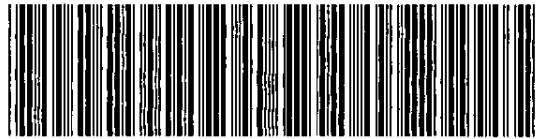
Special Instructions to Filing Officer:

L. SELLERS

FEB - 4 2009

EXAMINER

Office Use Only



900142357839

02/02/09--01028--023 **30.00

FILED
09 FEB -3 AM 8:03
SECOND DISTRICT
TALLAHASSEE FLORIDA

January 20, 2009

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

Re: GEMWRO, L.L.C.
Doc # L09000003867

Department of Corporations,

We have recently formed the above L.L.C. and learned that we titled the manager and managing member incorrectly in the initial filing.

The attached amendment is provided to correct those errors. However, the way the form is provided on-line, we were unable to fit the correct name in the space provided. Please note that the name of the new MGRM should be:

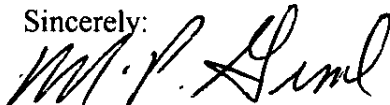
ENTRUST IRA SOUTHWEST FLORIDA, LLC FBO MICHAEL P.
GEML IRA# 60416TR.....replacing GEML, MICHAEL P. AS MGR

The new MGRM should be replaced to:

ENTRUST IRA SOUTHWEST FLORIDA, LLC FBO BARBARA A.
WROTEN IRA # 60348TR.....replacing WROTEN, BARBARA A.

Should you have any concerns or questions please feel free to contact me by phone at 239-691-4789 or email of x53banker@aol.com.

Sincerely:



Michael P. Geml

239-995-2526

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GEMWRO, L.L.C.

(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:

MICHAEL P GEML

(Name of Person)

GEMWRO, L.L.C.

(Firm/Company)

13070 SANDY KEY BEND #4

(Address)

NORTH FORT MYERS, FLORIDA 33903

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL P. GEML

(Name of Person)

at (239) 995-2526

(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**

GEMWRO, L.L.C.

(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 JANUARY 12, 2009 and assigned
Florida document number L09000003867

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)

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:

KARL C. LANDSTEINER, PA

New Registered Office Address:

5235 RAMSEY WAY #13

(Enter Florida street address)

FORT MYERS

(City)

Florida

33907

(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.

Karl C. Landsteiner
(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>
MGR	GEML, MICHAEL P.	13070 SANDY KEY BEND #4 NORTH FORT MYERS, FLA. 33903	<input checked="" type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	JAMES B. McMENAMY	7910 SUMMERLIN LAKES DRIVE FORT MYERS, FLA. 33907	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	WROTEN, BARBARA A	4641 PINE LEVEL WAY FORT MYERS, FLA. 33905	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	ENTRUST IRA SOUTHWEST	FLORIDA, LLC FBO BARBARA A WROTEN IRA # 60348TR 4560 VIA ROYALE #1 FT. MYERS, FL 33919	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	ENTRUST IRA SOUTHWEST	FLORIDA, LLC FBO MICHAEL P GEML IRA # 604416TR 4560 VIA ROYALE #1 FT. MYERS, FL. 33919	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> 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

MICHAEL P. GEML

Typed or printed name of signee

FILED
09 FEB -3 AM 8:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA