L09000015066

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

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OCT 5 2010 EXAMMER

COVER LETTER

TO: Registration Se Division of Cor						
SUBJECT:	G.B.E. F	INANCIAL, LLC.				
		ited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.				
Please return all correspo	ndence concerning this matter	r to the following:				
		Jenny Blume				
		Name of Person				
	G.B.E. FINANCIAL, LLC.					
	Firm/Company					
	13378 SW 128th Street					
Address						
	Miami, FL. 33186					
	City/State and Zip Code					
	inin	fo@gbefinancial.com to be used for future annual repo				
			rt notification)			
ror further information co	oncerning this matter, please of	call:				
	nny Blume	at (786_)	290-1143			
Name of Person		Area Code & I	Daytime Telephone Number			
Enclosed is a check for th	e following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
Registra Divisior P.O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314	Registration Division of C Clifton Build	Corporations			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
2010 OCT -4 PM 18 50

	G.B.E. FINAI	NCIAL, LLC.	\mathcal{E}_{*}	ECRETARY OF STATE	
(Name of the Limit	ed Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	s on our records. A	ECRETARY OF STATE ECAHAS ECAHAS	
The Articles of Organization for this Limited				and assigned	
Florida document numberL090000	15066				
This amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liab	oility company her	<u>e</u> :		
	G.B.E. FINAN	CIAL, LLC.			
The new name must be distinguishable and end w "L.L.C."	vith the words "Lim	ited Liability Compa	ny," the designation "	LLC" or the abbreviation	
Enter new principal offices address, if appl	13378 SW 128th Street				
(Principal office address MUST BE A STRE	Miami, FL. 33186				
Enter new mailing address, if applicable:	13378 SW 128th Street				
(Mailing address MAY BE A POST OFFICE	Miami, FL. 33186				
B. If amending the registered agent and registered agent and/or the new registered of	l/or registered of office address her	Tice address on o	ur records, enter	the name of the new	
Name of New Registered Agent:	Anibal E. G	uarderas			
New Registered Office Address:	13378 SW 1	128th St.			
		Enter Florida street address			
		Miami	, Florida		
		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.

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 **Type of Action** <u>Address</u> Title **Name** MGRM Blume, Jenny H 13378 SW 128th St. ☐ Add Remove Miami, FL 33186 Blume, Irene ☐ Add MGR 13378 SW 128th St. Miami, FL 33186 ☐ Remove MGRM Guarderas, Anibal E 13378 SW 128th St. ☐ Add ☐ Remove Miami, FL 33186 Ervin, Sidney MGR 20410 SW 125th Ave ☐ Add Remove Miami, FL, 33177 ∏Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Be advised, that one MGR is being removed Sidney Ervin, and the rest of the members address are being changed including that of the Registered Agent. September 28 Dated __ Signature of a member or authorized representative of a member Jenny H Blume Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00