L09000036352

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





800157131938

06/18/09--01010--001 **30.00

FILED

09 JUN 18 PM 12: 59

SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN
JUN 1 9 2009
EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	63 Geo	UA USA LLC ted Liability Company	
SUBJECT:	Name of Limit	ted Liability Company	· · · · · · · · · · · · · · · · · · ·
•			
		•	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	KENNETH	Name of Person Person Person Firm/Company	
	G3 G	EDUR USA LIC	
	14262 1	, KUBNIANK 1114	
	SPRNG	Address Hul - A 34609 City/Stale and Zip Code WIP 1 @ Aol. Com	09 JUN 18 PM 12: 59 SECRETARY OF STATE FALLAHASSEE, FLORIDA
		City/State and Zip Code	EFO P
	K-mail address: (WIP 1 & AOL. Com to be used for future annual report notification	TES IS
For further information	concerning this matter, please of	-	59 TATE ORID
_	1		
KENNETH	PATRICIC	at (727) 647 B.S.	25
Name	of Person	Area Code & Daytime Te	lephone Number
Enclosed is a check for	the following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis	LING ADDRESS: stration Section sion of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporatio Clifton Building	ons
Tallahassee, FL 32314		2661 Executive Center	r Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G3 GRAUP US	BA.LLC			
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)				
(A Florida L	ninted Liability Company)			
The Articles of Organization for this Limited Liability Co	omnany were filed on Again 45 2009 Fand assigned			
_	0,20			
Florida document number <u>4 090000 36352</u>	一			
	To R			
This amendment is submitted to amend the following:	OF U			
The distribution is successful to an incident the series with				
A. If amending name, enter the new name of the limit	ted liability company here:			
In Again				
The navy name must be distinguishable and end with the work	ds "Limited Liability Company," the designation "LLC" or the abbreviation			
"L.L.C."	as Ellinted Elability Company, the designation EEC of the above viation			
	1			
Enter new principal offices address, if applicable:	14262 LEYBOURNE WY. ESSI SARING HILL FLA 34609			
(Principal office address MUST BE A STREET ADDR.	ESS) SPRING HILL FLA 34609			
Enter new mailing address, if applicable:	14262 LEYBOVENE WY Spring Hill, Fr 34609			
(Mailing address MAY BE A POST OFFICE BOX)	Sprint HILL Fr 34609			
•	,			
D. If amounting the projectioned agent and/or project	ered office address on our records, enter the name of the new			
registered agent and/or the new registered office addr				
Together agents with the second secon				
L/L				
Name of New Registered Agent:	EN MORICE			
Now Business of Office Address	ELZ LEBBOYANE WY			
New Registered Office Address: INRUL LUB WINE WF Enter Florida street address				
	Spend force, Florida 3 4609			
	City Zip Code			
No. Designation of American Designation	I A			

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. Thereby 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

Address Title Name **Type of Action** PRES. LEW J. GARCIA

R/A DEBRA GRACIA

PRES. KENNEW W. PATRICK 3609 W. AZEELE ST TAMPA EL 33609 □ Add 3609 W. AZEELE ST TAMPA, FL 33609 Remove ∏Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) PRINCIPAL OF MAILING ASSESS CHANGE Speins Hus Fea 34609 Dated Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00