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B. KOHR

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EXAMINER

DIVISION OF CORPORATIONS

COVER LETTER

	on of Corporations		OS WASHINGTON	
SUBJECT:	GFC-MV	Holdings, LLC	OC ASS	
		d Liability Company		
The enclosed A	articles of Amendment and fee(s) are subm	itted for filing.	09007 13 14 9: 65	
Please return al	l correspondence concerning this matter to	the following:		
		George F. Coello		
		Name of Person	-	
	GF(C-MV Holdings, LLC		
	15155 W. COLONIAL DR, #784868			
	Address			
	Win	ter Garden FL 34787		
	City/State and Zip Code			
	E-mail address; (to	uezlan@yahoo.com be used for future annual report notification	on)	
For further info	rmation concerning this matter, please cal	•	,	
	George F. Coello		3-3368	
	Name of Person	Area Code & Daytime Tel	ephone Number	
Enclosed is a ch	neck for the following amount:			
₹ \$25.00 Filin	ng Fee S30.00 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		STREET/COURIER A	ADDRESS:	

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G	FC-MV Holdings, LLC		9 500
(Name of the Limited L (A F	iability Company as it now appear lorida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Lial Florida document number	bility Company were filed on		and assigning
This amendment is submitted to amend the follow	ving:		•
A. If amending name, enter the new name of t	he limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compa	nny," the designation "Ll	_C" or the abbreviation
Enter new principal offices address, if applical	ole:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u> </u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	City	, Florida	Zip Code
	$\cup uy$		гір Соае

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 <u>Title</u> **Name Address** Type of Action MGRM Christopher B. Coello 15155 W. COLONIAL DR, #784868 ☐ Add Winter Garden FL 34787 ✓ Remove 15155 W. COLONIAL DR, #784868 MGRM Jorge Coello ☐ Add Winter Garden, FL 34787 ✓ Remove ☐ Add □ Remove Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 1 2009 Dated_ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00