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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: GOLD EXCHANGE STORES INVESTORS II, LLC**  
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:

**Lisa Cabrera**

Name of Person

**Vandeventer Black LLP**

Firm/Company

**101 W. Main St., Suite 500**

Address

**Norfolk, VA 23510**

City/State and Zip Code

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

For further information concerning this matter, please call:

**Lisa Cabrera**

Name of Person

at ( **757** )

**446-8544**

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



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	S&S Management Enterprises, Inc.	17380 Duneden Ct Boca Raton, FL 33496	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Price M. Shapiro	101 W. Main St., Ste. 500 Norfolk, VA 23510	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input 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

9/19/11

2011

X

Signature of a member or authorized representative of a member

RANDY SHAPIRO

Typed or printed name of signer

Page 2 of 2

Filing Fee: \$25.00