Page 1 of 1 Division of Corporations **Division of Corporations Electronic Filing Cover Sheet**

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EXAMME

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, -	COVER LETTER H10000234820
Registration Section Division of Corporations	
	n Giris, L.L.C.
nclosed Articles of Amendment and fee(s) are su	ibmitted for filing.
se return all correspondence concerning this matte	
·	Cynthia Concha
	Name of Person
۲ <u>ــــــ</u> ۱۱۳۳۹۵۲۰۰۰	Firm/Company
	8701 SW 110 Street
	Miami, FL 33176 City/State and Zip Code
ac E-mail address: (dmin@ciaoitdown.com (w be used for future annual report notification)
or further information concerning this matter, please of	call:
Cynthia Concha	at (_786) 8976066
	at (_786) 8976066
Cynthia Concha Name of Person	at (_786) 8976066
Cynthia Concha Name of Person Inclosed is a check for the following amount: \$25.00 Filing Fee &	at (786) 8976066 Area Code & Daytime Telephone Number S55,00 Filing Fee & \$60.00 Filing Fee, Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy
Cynthia Concha Name of Person nclosed is a check for the following amount:]\$25.00 Filing Fee &	at (786) 8976066 Area Code & Daytime Telephone Number S555.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section
Cynthia Concha Name of Person Inclosed is a check for the following amount: \$25.00 Filing Fee Cortificate of Status MAILING ADDRESS:	at (786) 8978066 Area Code & Daytime Telephone Number S555.00 Filing Fee & S60.00 Filing Fee, Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Canter Circle
Cynthia Concha Name of Person nelosed is a check for the following amount:]\$25.00 Filing Fee &	at (786) 8978066 Area Code & Daytime Telephone Number S555.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

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ARTICL	ES OF AMENDMEN	T	000
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ARTICLE	OF ORGANIZATI	ON	
	OF		<u> </u>
G	reen Girls, LLC		AM 7:
(Name of the Limited Liabil (A Plorid	ity Company as it now appear a Limited Liability Company)	s ou our records.)	
The Articles of Organization for this Limited Liability	Company were filed on	2/4/10	and assigned
Florida document number L10000013195	ı		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here	1	
		r	
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Compar	y," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable.			
(Principal office address MUST BE A STREET ADD	RESS		
· · · · · · · · · · · · · · · · · · ·			
Enter new mailing address, if anniteshiet			
Enter new mailing address, if applicable:	<u>_</u>		
Enter new mailing address, if applicable: (<u>Muiling address MAY BE A POST OFFICE BOX)</u>			
	stered office address on or dress here:	ir records, <u>enter</u>	the name of the new
(Mulling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or registered office ad	stered office address on or dress here:	ir records, <u>enter</u>	the name of the new
(Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or regi	stered office address on or drcss here:	ur records, <u>enter</u>	the name of the new
(Mulling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or registered office ad	dress here:		
(Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office ad Name of New Registered Agent:	dress here:	ir records, <u>enter</u> r Florida street ada	
(Muiling address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office ad Name of New Registered Agent:	dress here:		

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

Page 1 of 2

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H10000224820

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	GCG Management, LLC	11767.S. Dixle Hwy #196 Pinecrest_FL 33156	Add Z Remove
MGRM	Cynthla Concha	8701 SW 110 Street Miami, FL 33176	7 Add Remove
			Add Remove
			Add Remove
		·	Remove
<u> </u>			Add Remove
D. If amending	g any other information, enter change(s) bere: (Allach additional sheets, if necessary.)	IN OCT 19
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Dated	October 13 , 2010	Alter representative of a member	
_	Cyr	ninia Concha	
		Page 2 of 2 HIDOOO22J Ig Fee: \$25.00	4820