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J. BRYAN

MAR 21 2012

EXAMINER

COVER LETTER

TO: Registration S Division of Co				
SUBJECT:	GSF F	roperties LLC		
		ited Liability Company		
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.		
Please return all corresp	pondence concerning this matter	r to the following:		
	Terr	i Searing - 503-228-145	5	
		Name of Person		
			•	75 PM
		Josselson & Potter		
		Firm/Company		到第二
				1 20 L
	9400 SW Beave	rton-Hillsdale Hwy, Ste	131-A	86 0
		Address		
	E	Beaverton, OR 97005		TALLAHASSEE, FLORID
		City/State and Zip Code		
		terri@jprlaw.com		
	E-mail address: (to be used for future annual report	notification)	
For further information	concerning this matter, please	call:		
	Terri Searing	at (_503_)	228-1455	
Name	of Person	Area Code & Da	ytime 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 enclo	osed) Certified	e of Status &
	LING ADDRESS:	STREET/CO	URIER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	GSF Properties LLC		
(<u>Name of the Limite</u> (,	d Liability Company as it now appea A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on	2/11/2010	and assigned
Florida document numberL1000001	6440		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	cable:		2012 HAR
(Principal office address MUST BE A STRE	ET ADDRESS)		33 8 F
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE			FD STAFF
B. If amending the registered agent and registered agent and/or the new registered o		our records, <u>enter t</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	10001 West Oakland Park	Blvd, Third Floor nter Florida street addi	ress
	Sunrise	, Florida	33351
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

<u> Fitle</u>	. <u>Name</u>	Address	Type of Action
			□ D amana
			Add Remove
			□ Damoua
			Remove T
			SS FAdd Part Remove
 			Remove
). If amen	ding any other information	a, enter change(s) here: (Attach additional she	eets, if necessary.)
_			
Dated	March 14		
	Signati	ire of a member or authorized representative of a m	ember
		Irving Potter	

Page 2 of 2

Filing Fee: \$25.00