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NOV 16 2010

EXAMINER



300187632163

11/12/10--01034--014 **30.00

FILED

10 NOV 12 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GEISCO HOLDINGS INTERNATIONAL, LLC
4350 PABLO PROFESSIONAL COURT, STE 200
JACKSONVILLE, FL 32224
904-296-2024

11/08/10

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN;

INCLUDED YOU WILL FIND A NAME CHANGE FROM AN EXISTING
LLC NAMED GUNNSLER HOLDING, LLC TO GEISCO HOLDINGS
INTERNATIONAL, LLC.

SHOULD YOU HAVE ANY QUESTIONS PLEASE FEEL FREE TO CALL
ME AT 904-607-4589 OR 904-296-2024.

Thank you

Dr. M. Curt GH

Dr. M. Curt Geisler

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GUNNSLER HOLDING, 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:

Dr. M. Curt GEISLER
Name of Person

GEISCO HOLDINGS INTERNATIONAL, LLC
Firm/Company

4350 PABLO PROFESSIONAL COURT, Ste 200
Address

JACKSONVILLE, Florida, 32224
City/State and Zip Code

CURT@SOUTHCOMPARTNERS.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. M. Curt GEISLER at (904) 607-4589
Name of Person 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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GUNNSLER HOLDINGS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on MARCH 1ST, 2010 and assigned Florida document number H10000046357.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GEISCO HOLDINGS INTERNATIONAL, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

NO CHANGE

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

NO CHANGE

FILED
10 NOV 12 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

NO CHANGE

New Registered Office Address:

NO CHANGE

Enter Florida street address

_____, Florida _____

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.

NO 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	<u>No CHANGE</u>	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	<u>No CHANGE</u>	_____	<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 11/3/2010, _____.

Dr. M. Curt Geisler
Signature of a member or authorized representative of a member
Dr. M. Curt GEISLER
Typed or printed name of signee