10000055914

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
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(Document Number)					
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

PERLMAN, BAJANDAS, YEVOLI & ALBRIGHT, P.L. ATTORNEYS AT LAW 1000 BRICKELL AVENUE, SUITE 600 MIAMI, FLORIDA 33131

TELEPHONE: (305) 377-0086 • TELEFAX: (305) 377-0781 E-mail Address: kimberly@pbyalaw.com

July 26, 2012

Division of Corporations Amendment Section Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Re: GLP Holdings,,LLC; Articles of Amendment to Articles of Organization

To whom it may concern:

Attached, please find the above-referenced Articles of Amendment form as well as check number 5493 in the amount of \$25.00 for the filing fee.

Should you have any questions please do not hesitate to contact the undersigned.

Thank you.

(Update

Kimberly Cipolato

Assistant

Enclosure(s)

COVER LETTER

TO:	Registration Section Division of Corpo	ion orations		
SUBJE	CT: GLP I	HOLDINGS, LLC		
SCESE	C1.	Name of Limit	ed Liability Company	
The end	closed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please r	eturn all correspond	lence concerning this matter t	to the following:	
		Kimberly Cipol		
			Name of Person	
		PBYA		
	Firm/Company			
1000 Brickell Avenue, Suite 600				
	Miami, Florida 33131 Address			
	City/State and Zip Code kimberly@pbyalaw.com			
		• •	be used for future annual report notificat	ion)
For furt	her information con	cerning this matter, please ca	all:	
Kin	nberly Cipolat	0		
Name of Person		Person	at (305) 377-0086 Area Code & Daytime Telephone Number	
			·	
Enclose	ed 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)
	Registrati	G ADDRESS: ion Section of Corporations 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

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

GLP HOLDINGS, LLC			
(Name of the Limiter	<mark>d Liability Company as it now ap</mark> A Florida Limited Liability Compan	pears on our records.)	
The Articles of Organization for this Limited I	-		_ and assigned
Florida document number L10000055964	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liability company	<u>here</u> :	
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Co	mpany," the designation "LL	C" or the abbreviation
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STREI	ET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		
B. If amending the registered agent and registered agent and/or the new registered of		n our records, enter the	name of the nev
Name of New Registered Agent:		TALLA	2
New Registered Office Address:	200 South Andrews Ave		
	Fort Lauderdale	Enter Florida street andre	ss — — — — — — — — — — — — — — — — — —
	City	OR OR	Zip:Code
New Registered Agent's Signature, if changing	Registered Agent:	IIDA	47

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 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 **Title Type of Action** Name **Address** ☐ Add Remove ☐ Add ☐ Remove ☐ Add ___ Remove Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 7/26/12 Signature of a member or authorized representative of a member W JUGA 1644 Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00