12/26/24, 2:09 PM

Division of Corporations

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PERLMAN, BAJANDAS, YEVOLT, & ALBRIGHT P.L.

Account Number : 120040000167 : (305)377-0809

: (305)377-0781 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

E Email Address: Corporatemial physlaw.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GLP HOLDINGS, LLC

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLP HOLDINGS, LLC		
(Name of the Limited	Liability Company as it now appears on of Florida Limited Liability Company)	ur records.)
The Articles of Organization for this Limited Liab		
Florida document number L10000055964	<u></u> ,	
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	he limited liability company here:	
The new name must be distinguishable and contain the wor	ds "Limited Ulability Company," the designa	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicat	nle:	
Principal office address MUST BE A STREET	ADDRESS)	. ;
		. !
Enter new mailing address, if applicable:		
Malling address MAY BE A POST OFFICE B	<u> </u>	·
 If amending the registered agent and/or registered office address 		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	reet address
		. Florida

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JENNIFER MURDOCK	283 CATALONIA AVENUE	
		SUITE 210	□Remove
		CORAL GABLES, FL 33134	
MGR	LAURENTS, LAMOTHE	2620 SW 27TH AVE	
-		3RD FLOOR	
		MIAMI, FL 33133	
			□Remove
			☐ Change
			□Add
			□Remove
			□Change
			DAdd
			□Remove
			□ Change
			□Add
			□ Change

Note:	tive date, if other than the date of filing: (optional) Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ment's effective date on the Department of State's records.
ie reco ord is f	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the iled.
Dated	DECEMBER 26 2024
	(tox)1+00)
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00