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(Cit	ty/State/Zip/Phone	: #)		
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Certified Copies	_ Certificates	of Status		
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2011 DEC 22 PM 12: 16
SHUTTARY OF STATE
AND ANASSEE, FLORIDA



COVER LETTER

TO:	Registration Sect Division of Corpo		,	3
SUBJE	ect∙	GF	MB LLC	•
		Name of Limit	ed Liability Company	
The en	closed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please	return all correspond	lence concerning this matter	to the following:	
			Marc Brannigan	
			Name of Person .	
			Firm/Company	
	2402 venetian way			
			Address	
		bo	ynton beach, fl 33426	
			City/State and Zip Code cavotti1@aol.com	
		E-mail address: (to	be used for future annual report notifical	cion)
For fur	ther information con	cerning this matter, please ca	all:	
	Name of P	erson	at ()	elephone 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)

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 FILED

2011 DEC 22 PM 12: 17

	GFMB LLC	SECRETARY OF S	TATE
(<u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now app Limited Liability Company	egrs <u>ion dur records</u>)fl)	ORIDA
The Articles of Organization for this Limited Liability (Company were filed on _	7/1/2010	and assigned
Florida document number L10000070038	<u></u> ·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company h	ere:	
The new name must be distinguishable and end with the wo'L.L.C."	ords "Limited Liability Com	pany,",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 applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
			
B. If amending the registered agent and/or registered agent and/or the new registered office add		our records, enter	the name of the ne
Name of New Registered Agent:			
New Registered Office Address:			
Now Registered Office Fiduress.	Enter Florida street address		
		, Florida City Zip Code	
	City	· .	Zip Code
New Registered Agent's Signature, if changing Register	ed Agent:		
hereby accept the appointment as registered agent	t and amon to get in this	agnacity I further as	rea 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 MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Clayton Brannigan	2402 venetian way Boynton Beach, FL 33426	✓ Add Remove
····			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter c	hange(s) here: (Attach additional sheets, if necessa	FILE 2011 DEC 22 STALLAHASSE
 		· · · · · · · · · · · · · · · · · · ·	ED 2 PH 12: 16 2 PH 12: 16 SEE, FLORIDA
Dated	December 21	2011	
	. 2	Marc Brannigan Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00