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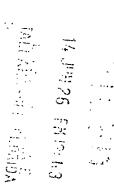
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Gulf Gate Shell 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:
Beth Stoner Name of Person Ez Tax Solutions Firm/Company 2975 Bee Rudge Rud Address Sara Sota FL 34239 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Beth Stories at 941 923 - 829 D Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Status Status Scriffied Copy (additional copy is enclosed) \$55.00 Filing Fee Certified Copy (additional copy is enclosed) \$60.00 Filing Fee, 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

Gulf Gate Shell 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 8/4/10 and assigned Florida document number LIOODD 81709.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
Faransis Food Mart 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)
Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)
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: EZ Tax Solutions Inc
New Registered Office Address: 2975 Bec Rudge Rd S
Sara sota Florida 34239
City 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 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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member			
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			Add
			Remove
			□ Add
			Remove
			Add
			Add □ Remove
			A Add
			Remove
			Add
			Remove

Ifam	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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•	
	·
Effec	ctive date, if other than the date of filing: (optional)
(The et	ffective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after
the d	ate this document is filed by the Florida Department of State)
Date	d June 18 , 2014.
Daic	
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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