## L11000027133

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J. BRYAN

MAR 17 2011

**EXAMINER** 

## **COVER LETTER**

Registration Section
Division of Corporations

SUBJECT:	GULFSTRE	AM NATIONAL LLC		
		ited Liability Company	THE SECRET	
The enclosed Articles of	f Amendment and fee(s) are sul	omitted for filing.	THE SOLETION OF PRINCIPLE OF PR	
Please return all corresp	condence concerning this matter	to the following:	MAN 16 PM	
		Reetu Haave		
		Name of Person		
	GULF	LC		
	1848 Wilbur Avenue			
		Address		
	rei	City/State and Zip Code etu.haave@gmail.com		
	E-mail address: (	to be used for future annual report	notification)	
For further information	concerning this matter, please of	call:		
Reetu Haave		at ( 772 )	562-6464	
Name of Person		Area Code & Da	sytime 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 encl	\$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		Registration S Division of Co Clifton Buildi	orporations <sub>.</sub> ng re Center Circle	

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

## **GULFSTREAM NATIONAL LLLC**

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

(A Flor	ida Limited Liability Company)		Ser. 3 1
The Articles of Organization for this Limited Liabili	ty Company were filed on	March 3, 2011	and assigned
Florida document numberL11000027133	<u>3                                    </u>		ORIO P
This amendment is submitted to amend the following	g:		·
A. If amending name, enter the new name of the	limited liability company he	ere:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AL	ODRESS)		
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 a	C	our records, enter t	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street add	ress
		, Florida	
_	City	, r torida	Zip Code
New Registered Agent's Signature if changing Regis	tered 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.

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 Type of Action Address Title Title **Name** Chad Kelley MGRM 1848 Wilbur Avenue ☐ Add ∇ Remove Vero Beach, FL 32960 Chad Kelly MGRM 1848 Wilbur Avenue ✓ Add Remove Vero Beach, FL 32960. MGRM Joey Stwarra 1848 Wilbur Avenue ☐ Add Vero Beach, FL 32960. Joey Stawara MGRM **V** Add 1848 Wilbur Avenue Remove Vero Beach, FL 32960 ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated \_\_\_ K. Haavl
Signature of a member or authorized representative of a member Reetu Haave Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00