## 11000063360

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2011 OCT 27 AMII: 18

T. HAMPTON

OCT 8 8 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section

•	orations			
SUBJECT:	GOLD GROVE	E PROPERTIES, LL	.C	
	Name of Lim	ited Liability Company		
The enclosed Articles of A	mendment and fee(s) are sul	bmitted for filing.		
Please return all correspond	dence concerning this matter	to the following:		
		O O - lath-la ana		
		Gary Goldbloom  Name of Person	<u></u>	
		Name of Ferson		
Gold Grove Properties, LLC				
		Firm/Company		
	201 Alhambra Circle, Suite 514			
		Address		
	C	oral Gables, FL 33134		
		City/State and Zip Code		
	gary	/goldbloom@gmail.con	n	
	E-mail address: (	to be used for future annual report	t notification)	
For further information cor	ncerning this matter, please of	call:		
Gary	Goldbloom	at (_305_)	446-8188	
Name of I	Person		aytime 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 enc	\$60.00 Filing Fee,   Certificate of Status &     Certified Copy   (additional copy is enclosed)	
Registrat Division P.O. Box	IG ADDRESS: ion Section of Corporations 6327 see, FL 32314	Registration S Division of C Clifton Buildi	orporations ing ve Center Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF 2011 OCT 27 AM 11: 18

GOLD GROVE PROPERTIES, LLC. OF STATE (Name of the Limited Liability Company as it now appears) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liab	oility Company were filed on	May 31, 2011	and assigned
Florida document numberL11000063360	MGR		
This amendment is submitted to amend the follow	ring:		
A. If amending name, enter the new name of the	he limited liability company he	ere:	
The new name must be distinguishable and end with to "L.L.C."	the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicab	le:		<del></del>
(Principal office address MUST BE A STREET.	ADDRESS)		
Enter new mailing address, if applicable:		<del></del>	
(Mailing address MAY BE A POST OFFICE BO	<u></u>		
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter th	e name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
	E	nter Florida street addr	ess
		, Florida	
	City		Zip Code

## New Registered Agent's 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 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** Name **MGRM** Gary Goldbloom ☐ Add

✓ Remove 201 Alhambra Circle Suite 514 EVELYN L GOLDBLOOM Coral Gables, FL 33134 IRR TRUST #3 Evelyn L Goldbloom Irr Tru MGRM 201 Alhambra Circle **√** Add Remove Suite 514 .... Coral Gables, FL 33134 \_\_\_ Add ☐ Remove ∏ Add Remove ∏Add Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated October 26 2011 Signature of member or authorized representative of a member Gary Goldbloom Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00