L11000087918

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EXAMINER



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SECRETARY OF STATE OF

COVER LETTER

TO: Registration Section Division of Corporations				All by
SUBJE	CT.	Gateway De	livery Service, LLC	٥
BODGE		Name of Limi	ted Liability Company	
The en	closed Articles of Ar	mendment and fee(s) are sub	omitted for filing.	
Please	return all correspond	ence concerning this matter	to the following:	
			Jim Wilder	
Name of Person				
The		he Wilder Group, Inc.		
			Firm/Company	
3000 Gulf to Bay Blvd., Suite 221			21	
			Address	
Clearwater, FL 33759				
. 		City/State and Zip Code		
jim@tampabaytax.com E-mail address: (to be used for future annual report notification)				
				otification)
For fur	ther information con	cerning this matter, please c	call:	
		n Wilder	at (727)	466-9575
	Name of P	erson	at (727) Area Code & Day	time Telephone 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 enclo	\$60.00 Filing Fee, Certificate of Status & Sed) 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



Gateway Delivery Service, 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 August 1, 2011 and assigned Florida document number _____L11000087918 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Gateway Delivery Service, LLC Enter new mailing address, if applicable: P.O. Box 20931 (Mailing address MAY BE A POST OFFICE BOX) St. Petersburg, FL 33742 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: New Registered Office Address: Enter Florida street address

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** Title **Address** <u>Name</u> ☐ Add Remove ☐ Add Remove _ Add □ Remove ∏ Add Remove ___Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member Russell Liotard Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00