L11000103469

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EXAMINER

COVER LETTER

| Division of Co | | | |
|--------------------------|--|---|--|
| SUBJECT: | G&S Mar | keting Solutions | |
| | | ited Liability Company | |
| The enclosed Articles of | of Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corres | pondence concerning this matter | to the following: | |
| | | Anirudh Godha | |
| | | Name of Person | 20 21 |
| | | | |
| | | Firm/Company | CT J M. S. S. F. F. C. S. |
| | i | 8120 NW 100th way | |
| | | Address | |
| | Ta | amarac/Florida/33321 | |
| | | City/State and Zip Code | |
| | Aniru E-mail address: ((| idh_Godha@yahoo.com to be used for future annual report notifica | tion) |
| For further information | concerning this matter, please c | · | |
| Α | nirudh Godha | at (_954) 85 | 54-8512 |
| | of Person | Area Code & Daytime T | |
| 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 enclosed) | \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | LING ADDRESS: tration Section | STREET/COURIER Registration Section | R ADDRESS: |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



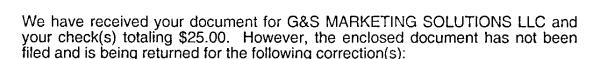
FLORIDA DEPARTMENT OF STATE Division of Corporations

September 26, 2011

ANIRUDH GODHA G&S MARKETING SOLUTIONS LLC 8120 NW 100TH WAY TAMARAC, FL 33321

SUBJECT: G&S MARKETING SOLUTIONS LLC

Ref. Number: L11000103469



The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #P11000051362, A & G MARKETING SOLUTIONS, INC..

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Letter Number: 511A00022114

Joey Bryan Regulatory Specialist II FILED WES

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited Liability Compa | Solutions LLC | on our records) | |
|--|---------------------|----------------------------|---------------------------|
| (Name of the Limited Liability Compa (A Florida Limited I | Liability Company) | on our records. | |
| The Articles of Organization for this Limited Liability Company | were filed on | 09/09/2011 | and assigned |
| Florida document numberL11000103469 | | | ~** |
| This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab | oility company here | : | 過過する |
| A.G. Busines | | • | 第二年 |
| The new name must be distinguishable and end with the words "Limi"L.L.C." | | y," the designation "L | LC" or the libbreviation |
| Enter new principal offices address, if applicable: | 8120 NW 100t | h Way | ** |
| (Principal office address MUST BE A STREET ADDRESS) | Tamarac FL, 3 | 3321 | |
| | | | |
| Enter new mailing address, if applicable: | 8120 NW 100t | h Way | |
| (Mailing address MAY BE A POST OFFICE BOX) | Tamarac FL, 3 | 3321 | |
| | . | | <u> </u> |
| B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her | | ır records, <u>enter t</u> | <u>he name of the new</u> |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | | | |
| | Ente | r Florida street add | ress |
| | | , 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

| MGRM = N | Managing Member | | |
|--------------|-----------------------------------|--|----------------|
| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
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| D. If amend | ding any other information, enter | r change(s) here: (Attach additional sheets, if necessary.) | |
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| | | | |
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| | | | <u> </u> |
| Dated | October 4 , | 2011 | |
| | 616 | The state of the s | |
| | Signature of a | Anirudh Godha | |
| | | Typed or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00