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(Re	questor's Name)			
(Ad	dress)	•		
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	cument Number)			
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12 JAN 17 AM 10: 22
SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co			معهد ۲۰۷	i. , 'Zaka
SUBJECT:	GAMINAL P	ROPERTIES, L	LC	
	Name of Limi	ted Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
	Yola	anda Katon, Legal	Asst.	
		Name of Person		
	,	Alex D. Sirulnik, P.	A.	
		Firm/Company		
	2701 Pa	once De Leon Blvd	Ste 202	
	270110	Address	. 010 202	
	0.	and Cables El 22	404	
		Oral Gables, FL 33 City/State and Zip Code	134	
	yk	•	om:	
	E-mail address: (1	aton@sirulniklaw.c o be used for future annual	report notificatio	n)
For further information	concerning this matter, please c	all:		
Y	olanda Katon	at (_305_)	443	3-7211
Name	of Person		le & Daytime Tel	ephone 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	l	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclose

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**

FILED 12 JAN 17 AM 10: 22

STATE FLORIDA
d assigned
the abbreviation
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ne of the new
Section - Continue - C
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 = M: MGRM = 1	anager Managing Member	•	
<u>Title</u>	Name	Address	Type of Action
MGR	ALBERTO CASSIS	1000 E. Hallandale Beach Blvd. Hallandale Beach, EL 33009	Add ☑ Remove
MGR	WALTER FISCHER	1000 E. Hallandale Beach Blvd. Hallandale Beach, FL 33009	✓ Add ☐ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, o	enter change(s) here: (Attach additional sheets, if necessor	FILED 12 JAN 17 AM 10: SECRETARY OF STA
Dated	January 12		RATE 22
		of a member or authorized representative of a member	
	Ale	x D. Sirulnik, Esq Registered Agent Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00