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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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7904 Interstate Court, North Fort Myers, FL 33917 Phone 800-741-7380 ◆ Fax 800-922-0474 www.greengallonsolutions.com

May 4, 2012

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Re:

GGS D, LLC

Name change to Green Gallon Solutions Marketing LLC

To Whom It May Concern:

Enclosed for filing, please find Articles of Amendment to Articles of Organization of GGS D, LLC. Also enclosed is a check in the amount of \$30.00 for the filing fee and certificate of status.

If you have any questions or need anything further please contact our office. Thank you for your assistance in this matter.

Sincerely,

Jamie Ellis

Jamie Ellis Customer Service Coordinator Green Gallon Solutions

Enclosures: as stated

COVER LETTER

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SUBJI	ECT:	GG		
5050				
The en	iclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			CHARD FINKBEINER	
			Name of Person	
GREEN GALLON SOLUTION Firm			OLUTIONS OF NORTH Firm/Company	AMERICA LLC
790.		4 INTERSTATE COURT		
7304 1141 2.1			Address	
N. FT. MYERS FL 33917				
City/State and Zip Code				
		E-mail address: (1	greengalionsolutions.co	m otification)
For fur	ther information o	oncerning this matter, please c	all:	
	RICHA	RD FINKBEINER	at (_800)	741-7380
	Name o	f Person	Area Code & Day	time Telephone Number
Enclos	ed is a check for t	he following amount:		
□ \$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclo	Sed) Sed) Sed) Sed) Sed) Sed) Sed) Sed)
	Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COU Registration Se Division of Con Clifton Buildin 2661 Executive Tallahassee, FI	rporations g : Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GGS D,			
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on pility Company)	our records.)	
The Articles of Organization for this Limited Liability Company w	ere filed on	1/9/2012	and assigned
Florida document number L12000003670			
This amendment is submitted to amend the following:			•
A. If amending name, enter the new name of the limited liabili	ty company here:		
GREEN GALLON SOLUTION	NS MARKETING	LLC	
The new name must be distinguishable and end with the words "Limited "L.L.C."	l Liability Company,"	the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)		,	
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
D. If any all the state of the		ī	1 64
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	e address on our	recoras, <u>enter t</u>	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:		ڔٙ	12 12
New Registered Office Address.	Enter F	lorida street add	ress = "
		. Florida	
	City	, 1 101 14(Zip Code
New Registered Agent's Signature, if changing Registered Agent:			FS =
I hereby accept the appointment as registered agent and agree	to act in this capac	ity. I further ag	REF COMPLY with

If Changing Registered Agent, Signature of New Registered Agent

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 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 = N	lanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MGRM</u>	EQUITY SOLUTIONS LLC	29 CHILESTONE LN MANCHESTER CT 06040	Add ☑ Remove
MGRM	JAMILA P. MITCHELL	19 STEVENS ST EAST HARTFORD CT 06118	Add Remove
			Add Remove
			Add Remove
	,		AddRemove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	
· —			_
_			-
Dated	MAY 4 , 20	012 .	
	Signature of a membe	r of authorized representative of a member	
		ICHAEL T SKIDD	

Page 2 of 2

Filing Fee: \$25.00