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**EXAMINER** 



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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: GERICH Enterprises LLC  Name of Limited Liability Company		
The enclosed Articles of Amendment and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:  Cerard. J. Chachia.  Name of Person  CERICH Enterprises LLC		
Firm/Company		
721 US HWY Suite 214		
North, palm beach. FL 33408 City/State and Zip Code		
Isogastcata & bellsouth, net JE-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Serend: Chachia at (561): 371 9911  Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S55.00 Filing Fee & Certified Copy (additional copy is enclosed)} \text{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

GERICH En	terprises LLC
(Name of the Limited Liability C (A Florida Lin	terprises LLC ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Con Florida document number 12000013146	
This amendment is submitted to amend the following:	من المنظمة الم
A. If amending name, enter the new name of the limite	d liability company here:
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRE.)	721 US Hwy 1 Suite 214 North portin beach . FL 33408
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	721 US HWY! Suite 214 North palm bench FL 33408
B. If amending the registered agent and/or register registered agent and/or the new registered office address	ed office address on our records, enter the name of the new ss here:
Name of New Registered Agent:	
* * *	US HWY 1 Suite 214.  Enter Florida street address
	Enter Florida street address  orth. Palmbeach., Florida 33408'  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 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** <u>Title</u> Name **Address** Richard A. Panetta 721 US HWY 1 Swite 214 North Palmbeach FL 33408 Remove 18009 COZUME I isle Drive TAMPA FL 33647-2990 MORM ARIFUR BHANDARI Remove ☐ Remove Add Remove  $\square$ Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated 8 27 2012. Signature dia member or authorized representative of a member Chachia Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00