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K.SALY EXAMINER JUL 26 2012

COVER LETTER

TO:	Registration Section Division of Corpo	on rations			
SUBJECT: G&A STRATEGIC INVESTME				LC	
		Name of Limit	ed Liability Company		•
The end	closed Articles of An	nendment and fee(s) are sub	mitted for filing.		
Please 1	eturn all corresponde	ence concerning this matter	to the following:		
		GF	REGORY MARSHALL		_
			Name of Person		
	G&A STRATEGIC INVESTMENTS LLC				_
			Firm/Company		
2429 H			9 HOLLYWOOD BLVD		_
			Address		
но			LLYWOOD, FL 33020		
			City/State and Zip Code		
	-	Gre E-mail address: (to	eglmar@bellsouth.net o be used for future annual report r	notification)	-
For furt	her information cond	cerning this matter, please ca	all:		
	LUZ S	SCHEMEL	at (_954 _{_)}	921-1021	
Name of Person		Area Code & Daytime Telephone Number			
Enclose	d is a check for the f	ollowing amount:			
\$25.	00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclo	osed) Certifi	Filing Fee, cate of Status & ed Copy onal copy is enclosed)
MAILING ADDRESS:		STREET/COU	URIER ADDRESS:		

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

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



G&A STRATEGIC INVESTMENTS 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 Lia	bility Company were filed on FE	BRUARY 22, 2012 and assigned	
Florida document number L120000256	<u>620 </u>		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability company here	ŗ.	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		

Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B			
B. If amending the registered agent and/or registered agent and/or the new registered offi		ur records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, 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, 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> <u>Name</u> Address MGR ALAN MACKEN 2429 HOLLYWOOD BLVD ✓ Add □ Remove HOLLYWOOD, FL 33020 ☐ Add ☐ Remove ☐ Add Remove Remove $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) JULY 24 Signature of a member or authorized representative of a member GREGØRY MARSHALL Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00