L12000060716

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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NIGO 6 2014 J. HARRIS

COVER LETTER

	egistration Sect vision of Corpo			
SUBJECT	GSD I	nvestment Pr	operty LLC	
SUBJECT	·		ted Liability Company	
The enclose	ed Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please retui	n all correspond	lence concerning this matter t	o the following:	
		Joede B Alm	neida	
			Name of Person	
		GSD Investr	nent Property	/
			Firm/Company	
		4731 N. Pine	e Hills Rd	
		, Av	Address	
		Orlando, FL	32808	
			City/State and Zip Code	
		elieldellen@gmail.		
m 2 1			o be used for future annual rep	ort notification)
		cerning this matter, please ca		
Ellen	Sousa		at (<u>407</u>) <u>44</u> 1	5-4489
	Name of I	Person Person	Area Code	Daytime Telephone 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 is enclose	S60.00 Filing Fee, Certificate of Status & 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



July 18, 2014

JOEDE B ALMEIDA 4731 N PINE HILLS RD ORLANDO, FL 32808

SUBJECT: GSD INVESTMENT PROPERTY LLC

Ref. Number: L12000060776

We have received your document for GSD INVESTMENT PROPERTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6051.

Letter Number: 614A00015531

Jenna D Harris Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited		pears on our records.)	
(/	Liability Company as it now ap A Florida Limited Liability Compa	iy)	
The Articles of Organization for this Limited Lia	bility Company were filed on	05/04/2012	and assigned
Florida document number L12000060776			
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability compan	v here:	
The new name must be distinguishable and end with the we	ords "Limited Liability Company,"	the designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if applical	ble:		- 28 - 28 - 28 - 28 - 28 - 28 - 28 - 28
(Principal office address MUST BE A STREET	ADDRESS)		
			00
			3 296
Enter new mailing address, if applicable:			- 23 28
(Mailing address MAY BE A POST OFFICE B	OY)		<u> </u>
maning address mill bb ill ost of fice b	<u></u>		<u></u>
B. If amending the registered agent and/or the new registered offi		on our records, enter the	name of the new
Name of New Registered Agent:	Joede Almeida		
New Registered Office Address:	4731 N. Pine Hills F	Rd	
	Enter	Florida street address	-
	Orlando	, Florida <u>32</u> 80	08
	City	, 1 1011111	Zip Code
New Registered Agent's Signature, if changing Re	gistered Agent:		
hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registateing filed to merely reflect a change in the recompany has been notified in writing of this change in the company has been notified in writing of this change in the ch	and complete performance ered agent as provided for t gistered office address, I he	of my duties, and I am fam In Chapter 605, F.S. Or, if t	iliar with and his document is

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = A	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
MGR	Raniel Almeida	2656 Shinoak Dr	□ Add
		2656 Shinoak Dr Orlando Fl. 32837	■ Remove
		26De Shinoak Dr Orlando	oF1.32837
MGR	Elield Sousa	2656 Shinoak Dr Orlando	<u>5 F1378</u> 37 B Add
			□ Remove
			Add
			Remove
			——————————————————————————————————————
			#14 8 PH
			∷ Remove
			-
			Add
			Remove

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Effective date, if other than the date of	Filling: 07/09/2014 7/30/2014 (optional)
The effective date must be specific, cannot be price	or to date of receipt or filed date and cannot be more than 90 days after
the date this document is filed by the Florida Dep	partment of State)
Dated July 9th	2014
Dated Oct. 7	
	e of a member or authorized representative of a member
Joede B Almeida	a /
	Typed or printed name of signee

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Filing Fee: \$25.00