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12 JUN 28 PM 3:54
SECRETARY OF STATE
ALLAHASSEE, FLORIGA

COVER LETTER

O: Registration Section Division of Corporations
UBJECT: GAUDINO GROUP LLC Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
MARK GAUDINO
10121 W. Synkise Blud. #202
City/State and Zip Eode GAydino & Comcast. Net E-mail address: (to be used for future annual report notification)
or further information concerning this matter, please call:
MARK GAUDINO at 954 818 - 6593 Name of Person Area Code & Daytime Telephone Number
nclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$55.00 Filing Fee & \text{S60.00 Filing Fee,} \\ \text{Certificate of Status}\$\$\$ Certified Copy (additional copy is enclosed)\$\$\$ 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

JUST 1651

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Gaudino	GROUP 1	LLC	
(Name of the Limited Lia (A Flo	ibility Company as it now a prida Limited Liability Compa		
The Articles of Organization for this Limited Liabi		<u>June</u>	7 ^H 2012 and assigned
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of the	dino LLC		ation "LLC" or the abbreviation
"L.L.C."			
Enter new principal offices address, if applicabl	e:		
(Principal office address MUST BE A STREET A	(DDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	registered office address	on our records,	12 JUN 28 Plame of the new enter the Bame of the new 3:54
Name of New Registered Agent.			
New Registered Office Address:		Enter Florida str	reet address
		, Flor	rida
-	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 = M	anager Managing Member		
Title .	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add
		•	Add
	·		Add Remove
			Add
D. If ame	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	y.)
_		· · · · · · · · · · · · · · · · · · ·	
-			
Dated	6/26/12		
	MARK (er or authorized representative of a member	
	Туре	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00