

L120000075915

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500248338525

06/19/13--01012--009 **25.00

CLERK OF SUPERIOR COURT
TALLAHASSEE, FLORIDA

13 JUN 19 PM 2:59

FILED

JUN 21 2013
D. BUTLER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **GUMPAK FLORIDA 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:

MICHAEL H. DOVER

Name of Person

GUM-AWAY LLC.

Firm/Company

15612 MARKHAM DRIVE

Address

CLERMONT, FL 34714

City/State and Zip Code

mike@connectms.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL DOVER

Name of Person

727 945-7722

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 enclosed)

☐ \$60.00 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

FILED
13 JUN 19 PM 2:59
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GUMPAK FLORIDA 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 Liability Company were filed on JUNE 6, 2012 and assigned
Florida document number L12000075975.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GUM-AWAY LLC.

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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

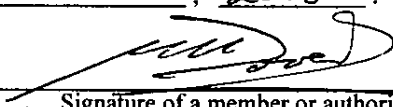
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHAEL H. DOVER	15612 MARKHAM DRIVE	<input type="checkbox"/> Add
		CLERMONT, FL 34714	<input checked="" type="checkbox"/> Remove
MGRM	SALLY ANN JOHNSON	THE ROBIN HOOD INN	<input type="checkbox"/> Add
		26 THE GREEN, ROWLANDS CASTLE,	<input checked="" type="checkbox"/> Remove
		HAMPSHIRE, PO9 6AB, U.K.	
MGRM	MICHAEL H. DOVER	15612 MARKHAM DRIVE	<input checked="" type="checkbox"/> Add
		CLERMONT, FL 34714	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

18 JUN 99 PM 2:59
RECEIVED
CLERMONT, FL 34714

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated JUNE 17TH, 2013.



Signature of a member or authorized representative of a member

MICHAEL H. DOVER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
13 JUN 19 PM 2:59
CLERK OF SUPERIOR COURT
CLERK OF SUPERIOR COURT