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B. BOSTICK
DEC 1 0 2013

EXAMINER

## COVER LETTER

TO: Registration Section **Division of Corporations** 

GAFF P & P, 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:

ANTONIO E. REGOJO Name of Person REGOJO LAW, P.A. 3550 BISCAYNE BLVD. SUITE 507 Address MIAMI, FLORIDA 33137 City/State and Zip Code O @ Avenda Lega L. com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

Name of 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 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GAFF P & P, LLC				
( <u>Name of the Limited L</u> (A F	iability Compar Torida Limited L	y as it now appears on our recontability Company)	rds.)	
The Articles of Organization for this Limited Lia Florida document number <u>L12000078978</u>	bility Company	were filed on <u>06/14/2012</u>	The Contract of the Contract o	and assigned
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:			<u>(A</u>	-
			. 2001	PH 6:51
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," the desig	nation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)		3550 BISCAYNE BL	VD. SUI	TE 507
		MIAMI, FLORIDA 33137		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		3550 BISCAYNE BLVD. SUITE 507 MIAMI, FLORIDA 33137		
B. If amending the registered agent and/o registered agent and/or the new registered off	ice address her		enter the	name of the new
Name of New Registered Agent:				
New Registered Office Address:	3550 BISCAYNE BLVD. SUITE 507			
	Enter Florida street address			
	MIAMI	, Flo	orida <u>331(</u>	Zip Code
N Daile 14 delle existe to the D	. • 4 4 4	City	•	sip 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>	Name	Address	Type of Action
MGR	Carlos Pariani	11077 Biscayne Blud 4406	Add
		Miami, FL 33161	Remove
			_
MGRM	Guillermo E. Pariani	11077 Biscayne Blud # 40.	Add
		Miami, FL 33161	Remove
			_
MGRM	Federico Luis Pariani	11077 Biscayne Blud H460	Add
		Michi, FL 3316) =	
M (+ R	Carlos Paciani	3550 Biscayne Blvd 150	
		Migmi, FL 33137	Remove
MGRW	Guillermo E. Pariani	3550 Biscayne Blud 450	Add Add
		Migni, FL 33137	Remove
			-
MGRM	Federico Luis Parlan	3550 Biscayne Blud 450	Add
		MigMi, FL 33137	Remove

D.· If amending any other information, ente	er change(s) here: (Attach additional sheets, if necessary.)
Dated NOVEMBER 11	2013
2- R	
	a member or authorized representative of a member
——ANTONIO E. REGOJO	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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