ľ

Office Use Only



700253568367

11/07/13--01014--003 \*\*25.00

2013 NOV -7 <u>بب</u>

B. BOSTICK

NOV - 8 2013

**EXAMINIT**S

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: G&K MARINE PARTS 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:

	EDUARDO MEDINA					
		•				
	G&K MARINE PA					
		•				
DORAL FL 33166						
City/State and Zip Code						
Qty.donovan@gmail.com  E-mail address: (to be used for future annual report notification)						
For further information cor	acerning this matter, please ca	all:		A	2013 1403	- ,
Andres Hurtado		at ( 305 ) 4238932		ν. υ.υ. Ε	1	•
Name of Person		Area Code & Daytime T	elephone Number	r FLOR	PH 3:	
Enclosed is a check for the	following amount:			ll)		
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Sta		osed)

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

## **G&K MARINE PARTS 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 06/14/2012 and assigned Florida document number L12000078980 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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

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.

Citv

\_, Florida \_

Zip Code

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>	Address	Type of Action
MGRM	MEDINA, EDUARDO	7801 NW 37TH ST SUITE LP-104	Add
		DORAL, FL 33166	Remove
MGRM	REYNOSO, BEATRIZ	2700 COLLINS AVENUE, SUITE 10	
		MIAMI BEACH, FL 33140	Remove
			_
		TALLALLA	Remove
		A SEE CO	Add
		LONG LONG LONG LONG LONG LONG LONG LONG	Remove
			Add
			Remove
			Add
			Remove

D. If amen	ding any other information, enter	change(s) l	ere: (Attach additional sheets, if necessary.)
	ı		
. —			
	A STATE OF THE STA		
NC	VEMBER 5TH	2013	. /
Dated NO	,		\
	Signature of a	member or au	thorized representative of a member
	MEDINA, EDUARDO		
		Typed or pr	nted name of signee

Page 3 of 3

2013 WOY - 1 PA 3: 1