Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

: (850)617-6383

From:

Account Name : GFB TAX SERVICE LLC

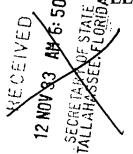
Account Number : I20120000047 : (754)246~6160

: (954)510-2072 Fax Number

Enterthe email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

LC AMND/RESTATE/CORRECT OR M/MG RESIGN WADDE INVESTMENTS LLC



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Page Count	04
Estimated Charge	\$25.00

T. HAMPTON



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COVER LETTER

	egistration Sectivision of Corpo					
SUBJECT	:	Name of Limit	CESTMENTS ed Liability Company	LLC		
The enclose	ed Articles of Ar	nendment and fee(s) are sub	mitted for filing.			
Please retur	rn all correspond	ence concerning this matter	to the following:			
			GASTON BELEN			
Name of Person						
GFB TAX SERVICE LLC						
Firm/Company						
	5210 SW 201st TERRACE					
	Address					
	SOUTHWEST RANCHES, FL 33332					
City/State and Zip Code						
GASTONBELEN@GFBTAXSERVICE.COM 6-mail address: (to be used for future annual report notification)						
For further	information con	cerning this matter, please co	all:			
		ON BELEN	at (754)	246-6160		
Name of Person Area Code & Daytime Telephone Number						
Enclosed is	a check for the	following amount:				
\$25.00 1	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

3988

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liabil (A Florid	lity Company as it now appears or da Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Florida document number 1220007854	Company were filed on $\frac{06}{2}$	28 2012 and assigned
This amendment is submitted to amend the following:	:	EC -5
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and end with the v "L.L.C."	vords 'Limited Liability Company,'	the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regregistered agent and/or the new registered office ac		records, enter the name of the nev
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

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MGR = Manager

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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:

MGRM = Managing Member Title <u>Name</u> Address Type of Action Gaston F. Belen ZIAdd Remove ☐ Add Remove Add Remove Add Remove Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized rep e of a member **GASTON BELEN** Typed or printed name of signee

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Filing Fee: \$25.00

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