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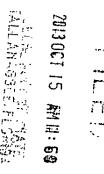
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## **COVER LETTER**

ТО:	Registration Section Division of Corporations		
SUBJE	ECT: GS Emporium LLC		
	Wame of Limited Liability Company		
The end	closed Articles of Amendment and fee(s) are submitted for filing.		
Please r	return all correspondence concerning this matter to the following:		
	GRAHAM FIRTH.		
	Name of Person		
	GS emponum		
	4739 Old & Canoe Creek	Rd.	
	Address  St. Cloud FL 34769  City/State and Zip Code  gsenformen @ 4mail. Com.  E-mail address: (to be used for future annual report notification)	2013 OCT 1	
	City/State and Zip Code  Gentlem (a) 4m cul, Com.  E-mail address: (to be used for future annual report notification)		
For furt	ther information concerning this matter, please call:	• •	
	Gruham Fifth  at (407, 873, 0175)  Name of Person  Area Code & Daytime Telephone Number	<b>5</b> 1	
Enclose	ed is a check for the following amount:		
\$25	(additional copy is enclosed) Certified	e of Status &	ed)

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

GS EMP	Portium .	LLC	
(Name of the Limited Liability	•	oears on our records	<u>, )                                   </u>
The Articles of Organization for this Limited Liability Of Florida document number 4120060 8	Company were filed on _ 8538	7/9/20	12 and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company	here:	
The new name must be distinguishable and end with the wo		22 al	57 . C2
"L.L.C."	ras "Limited Liability Col	mpany," the designati	ion "LLC" or the abbreviation
Enter new principal offices address, if applicable:			in a C
(Principal office address MUST BE A STREET ADD)	RESS)		ing.
			<b>1 1 1 1 1 1 1 1 1 1</b>
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		on our records, <u>en</u>	iter the name of the new
Name of New Registered Agent:	·		
New Registered Office Address:		Enter Florida stree	et address
			·
	City	, Florid	la 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

Title '	Name	Address	Type of Action
MGRM	Susann Hine	4739 Old Canoe Creek Re	Add Add
		4739 Old Canoe Creek Re Saint Cloud, FL 34769	Remove
		34769	····
<del></del>			Add
			Remove
		да * с. з Р— ў г	2013 OC
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). If a	imending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	•
	•
ated .	10/10/2013
	Jahan Fritt
	Signature of a member or authorized representative of a member $AHAM\_YIL7H$ .
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 OCT 15 MIN . F.