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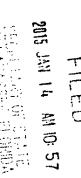
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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N. Gulligan JAN 2 9, 2015

ATTORNEYS CORPORATION SERVICE, INC.

5668 EAST 61ST STREET COMMERCE, CA 90040

TEL: (800) 462-5487 ext.104 FAX: (800) 388-0330 EMAIL: mgomez@attorneyscorpservice.com

DOCUMENT FILING REQUEST LETTER

REGULAR FILING SERVICE

DATE: 01/12/2015

FROM: MACHEAL GOMEZ

Client Matter: # 9039624

TO: REGISTRATION SECTION

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

ATTN: DOCUMENT FILING DIVISION

RE: GPH Sales & Marketing LLC

Enclosed is one of the following: (1) Articles of Amendment

Return request with filing: (1) Certified Copy

Return request via following: (X) Priority Mail/Email

Total Page(s) attached including transmittal page: (4)

Fax/Email a copy of the filed documents upon acceptance of filing

PLEASE RETURN FILED DOCUMENTS ATTACHED WITH AN INVOICE TO: ATTORNEYS CORPORATION SERVICE, INC. 5668 E. 61st STREET COMMERCE, CA 90040

PLEASE CONFIRM UPON RECEIVED DOCUMENTS

NOTE(S):

COVER LETTER

Division of C			
GPH S	ALES & MARKETING L	LC	
SUBJECT.	Name of Li	mited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.	
	pondence concerning this matte	_	
	MACHEAL GOME	<u>z</u>	
		Name of Person	
	ROCKET LAWYER	1	
	-	Firm/Company	
	5668 EAST 61ST S	STREET	
		Address	
	COMMERCE, CA	00040	
		City/State and Zip Code	
	mgomez@attorneys	•	· · · · · · · · · · · · · · · · · · ·
		(to be used for future annual report notif	ication)
For further information	concerning this matter, please of		
MACHEAL GOME	Z	at (800) 462-5487	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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)
MAII	INC ADDDCCC.	CTDEET/COUDIN	ED ADDRESS.

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

FILED

2015 JAN 14 AM 10: 57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GPH SALES & MARKETING LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	Ability Company w	vere filed on OCI	ober 24, 2012	and assigned
Plorida document number <u>U2001</u>	252-43	Orași e		
This amondment is submitted to amend the fol	lowing:			
A. If amending name, enter the new named	si dianimita habii	tv company here	:	
A State of the sta	2000		sogie .	
The new name must be distinguishable and end with the	words "Limited Liabili	ty Company," the dea	rignation "LLC" or the abbrev	ation "L.L.C."
Enter new principal offices address, if applications	cable:			
(Principal office address MUST BE A STREE	ST ADDRESS)		, , , , , , , , , , , , , , , , , , ,	
••				~
	•			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>			
•				
B. Alexandeding the registered deept and registered agent and/or the new registered of		ce address on o	ur records, <u>enter (lie</u>	name of the new
Name of New Registered Arent	and the second	· · · · · · · · · · · · · · · · · · ·	. Y	
Maine of new Registered Agent				
Name of New Registered Arent.		Enter Florida	street address	
		Enter Florida		
		Eniar Florida City	Florida	o Code
New Registered Diffice Address:	logistored Agent:		Florida	Code
	d agent and agree er and complete pe stered agent as pro registered office aa	City to act in this cap erformance of my evided for in Cha	Plorida Zij pacity. I further agree to pacity, and I am famili pter 605, F.S. Or, if thi	comply with the ar with and s document is

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

<u>Tide</u>	Name		Address	Type of Actio
MGRM	Granam	Paul Hamson	2650 LAKE SHORE DRIVE, UNIT#904	4 ■ Add
		•	RIVIERA BEACH, FL 33404	Remove
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		The second secon	The company of the co	_CI Remove

read as follows: SANDRA JUI	LIE HARRISON
2650 LAKE SHORE DRIVE, U	JNIT#904 RIVIERA BEACH, FL 33404
	and the second s
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Elling Fee: 525.00

SECRETARY OF SIX

FILED 2015 JAN 14 AM IO: 57