

L12000147434

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Outigan SEP - 9 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GL1, 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:

Rienaldo Castellanos, Esq.

Name of Person

Reinaldo Castellanos, P.A.

Firm/Company

9960 Bird Road

Address

Miami, Florida 33165

City/State and Zip Code

rey@castellanoslaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Reinaldo Castellanos, Esq.

Name of Person

305-223-8744

at (_____) _____
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

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GL1, 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 November 21, 2012 and assigned
Florida document number L12000147434.

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**)

300 Bayview Drive, Suite 606
Sunny Isles, Florida 33161

Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

300 Bayview Drive, Suite 606
Sunny Isles, Florida 33161

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:

Reinaldo Castellanos, P.A.

New Registered Office Address:

9960 Bird Road

Enter Florida street address

Miami

City

, Florida 33165

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

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Oscar Alfuzzi	10800 Biscayne Blvd., Suite 988	<input type="checkbox"/> Add
		Miami, Florida 33161	<input checked="" type="checkbox"/> Remove
MGR	Leon P. Rodger	10800 Biscayne Blvd., Suite 988	<input type="checkbox"/> Add
		Miami, Florida 33161	<input checked="" type="checkbox"/> Remove
MGR	Oscar Alfuzzi	300 Bayview Drive, Suite 606	<input checked="" type="checkbox"/> Add
		Sunny Isles, Florida 33161	<input type="checkbox"/> Remove
MGR	Leon P. Rodger	300 Bayview Drive, Suite 606	<input checked="" type="checkbox"/> Add
		Sunny Isles, Florida 33161	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated August 27 2013



Signature of a member or authorized representative of a member

Reinaldo Castellanos, Registered Agent

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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