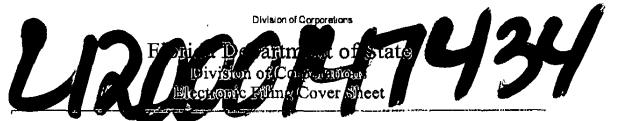
2/22/2016



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000045286 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAW OFFICES TONY PORNPRINYA

Account Number : 120010000164

Phone : (305)893-8989

Fax Number

: (305)891-7717

**Enter the email address for annual report mailings.	this Enter	business only one	entity email	to be	used f	je je je	₩e
						2023/11 >> 1514	Ö

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

GL1, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H16000045286 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GLI, LLC	•	
(Name of the Limited Liability Comm (A Florida Limited	any as it now appears on one records.) Liability Company)	
The Articles of Organization for this Limited Lizbility Company Florida document number L12000147434	y ware filed on 11/21/2012	and assigned
This amendment is submitted to amend the following:	,	
A. If amending name, enter the new name of the limited list	nility company hore:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or t	he abbreviation "L. L.C."
Enter new principal offices address, if applicable:	1555 NB 123 STREET	
(Principal office address MUST BE A STREET ADDRESS)	NORTH MIAMI, FL 33161	
		·
Enter new malling address, if applicable:	1555 NE 123 STREET	7. C
(Mailing addross MAY BE A POST OFFICE BOX)	NORTH MIAMI, FL 33161	
		io di
To the second of		SS 22
 If amending the registered agent and/or registered of registered agent and/or the new registered office address her 		ter the pame of the r
		er er
Name of New Registered Agent:		
New Registered Office Address:		Σ σ
	Enter Florida straat addrass	
	, Florida	Zw Code
ow Registered Agent's Signature, if changing Registered Agent:	City	гу сиае

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 duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, 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

Page 1 of 3

(((H16000045286 3)))

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR ⇒ Manager AMBR ⇒ Authorized Momber

Title	Name	Address	Type of Action
MBR	ALFUZZI, OSCAR	1555 NE 123 STRBET	
		NORTH MIAMI, FL 33161	□ Remove
-			E Change
MBR	PEREZ DURAN DEL ROSARIO,	1555 NE 123 STREET	D Add
	MÁRTA	NORTH MIAMI, FL 33161	□ Remove
MBR	ALFUZZI PEREZ ALBJANDRA,	1555 NE 123 STREET	Add
	MARIA	NORTH MIAMI, PL 33161	
			— ☐ Change
			A Add 20 Remove A S C Changes
			Add A D
	·		Change
	**************************************		DAdJ
			Remove
			Change

									
			···						
		, s							
					<u> </u>				
								···	
-					 ,			· · · · · · · · · · · · · · · · · · ·	·
					······································				
								<u>-</u>	
	<u>,</u> =								
						 .			
	,								· .
									23
									18 F
tive d	ate, if other t	han the date	of filing	rangot be urio	r to date of fil	ng or more the	n 90 days after	onal) Illing Promise	55 1 10 605.02
. If the	date inserted i	in this block do	es not me	et the uppli-	cabic statuto	ry filling requ	irements, this	date will not	pe Miled
					•			n in	\triangleright
cord 90th	specifies a c 1 day after t	delayed.effe the record is	ctive da i filed,	ite, but ni	ot an effec	tive time,	at 12:01 a	m. on the	earli ë r
	Feb :	2 z		2016		•		¥.	. (1)
		· · · · · · · · · · · · · · · · · · ·	,	_ <u></u>	—·	,			
_		Signac	ure of a me	omber) or auth	-authorized represe	multive of a m	ombor	7-14-8	
		•		U PORNPRIN					
_				yped or prini					

Filing Fee: \$25.00

(((H16000045286 9)))

?