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Page: 2

12/26/12

Div: Corporations

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L1200059176

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GFB TAX SERVICE LLC
Account Number : I20120000047
Phone : (754) 246-6160
Fax Number : (954) 510-2072

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

Email Address: _____

RECEIVED
12 DEC 27 AM 6:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ECLIPSE GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

12 DEC 27 AM 8:09

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

DEC 28 2012

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T. HAMPTON

COVER LETTER

H12000300903 3

**TO: Registration Section
Division of Corporations**

SUBJECT: ECLIPSE GROUP 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:

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

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

For further information concerning this matter, please call:

GASTON BELEN

Name of Person

at (**754**)

246-6160

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

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

H12000300903 3

ECLIPSE GROUP LLC

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

12 DEC 27 AM 8:09

FILED
CLERK OF CIRCUIT
CLERK OF CIRCUIT
CLERK OF CIRCUIT

The Articles of Organization for this Limited Liability Company were filed on 12/20/2012 and assigned
Florida document number L12000159176

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 "L.L.C." or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

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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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

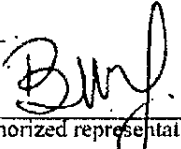
Title	Name	Address	Type of Action
	LUIS DANIEL RECCHIMUZZI		
MGRM	BARREIRO	% GFB TAX SVCE 6303 BLUE	<input checked="" type="checkbox"/> Add
		LAGOON SUITE # 400	<input type="checkbox"/> Remove
		MIAMI, FL 33126 US	
MGRM	RECCHIMUZZI, DANIEL	% GFB TAX SVCE 6303 BLUE	<input type="checkbox"/> Add
		LAGOON DRIVE SUITE # 400	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33126	
			<input type="checkbox"/> Add
			<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.)

12 DEC 27 AM 8:09

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Dated DEC 26, 2012


 Signature of a member or authorized representative of a member

GASTON BELEN

Typed or printed name of signee

[H12000300903 3]