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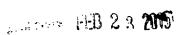
(Re	equestor's Name)	
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## **COVER LETTER**

TO:	Registration S Division of Co			1.7.1.181
SUBJI	ECT: <u>GC Re</u>	al Estate Holdings Rosema	IN LLC	
		Name of Lin	ifed Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		د د د د د د د د د د د د د د د د د د د	Emma Gutin	est handiskelen en e
			Name of Person	
		GC Re	eal Estate Holdings Rosemary	LLC
		***************************************	Firm/Company	
		in a distribution compacts of constraints put in property $x \in (0,0)$ in equipment the design of the data in some	100 Wadsworth Road	n construencia de la companio del companio de la companio del companio de la companio della companio de la companio della comp
			Address	
			Staten Island, NY 10305	
			City/State and Zip Code	4
	• •	begre li-mail address: (	alestateholdings@gmail.com	lication)
For far	ther information o	oncerning this matter, please o	ult;	
	Emma	Gutin	at ( 561 ) 578-020	2
	Name o	f Persan		e Telephone Number
Linclos	ed is a check for t	he following amount:		
•	5.00 Piling Fee	32 \$30.00 Filing Fee & Certificate of Status	S55.00 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, F1, 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

GC Real Estate Holding	s Rosemary LLC			
(Name of the Limit	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company)			
The Articles of Organization for this Limited L	iability Company were filed on 3/11/2013	an	d assig	ned
Florida document numberL13000036821_				
This amendment is submitted to amend the following	owing:			
A. If amending name, enter the new name o	f the limited liability company here:			
The new name must be distinguishable and end with the	words "Limited Liability Company," the designation "LLC"	or the abbreviat	ion 4.1	.c.
Enter new principal offices address, if applic	able:	tith up to the time up tra-	a r - o a vocable gris gles vocables a	- hannes graphing de care de .
(Principal office address MUST BE A STREE	T ADDRESS)			
		### <b>############</b>	The second se	revergeroom, giverage.
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	RON		***********	an extension of the
Comming datases MAT BE A TOST OF THE		waren <del>en gere z de Maria</del> n is <b>au</b> man	t 3.g. <del>au.upski</del> pckel	
		* <del> </del>	<del></del>	**********
	for registered office address on our records,	enter the na	ame of	the nev
registered agent and/or the new registered o	flice address here:		5	
			8	74T
Name of New Registered Agent:	Boris Gutin	32 T		PROBET.
New Registered Office Address:	_1830_South Ocean Drive_2802	10) E		į.
	Enter Florida smeet address		¥	<b>57</b> }
	Hallandale Beach BLVD, Flori	da <u>8300</u> 9	Ÿ	August.
	Chy	三型	েক্ট্র	
New Registered Agent's Signature, if changing	Registered Agent:	35.00		
provisions of all statutes relative to the prop accept the obligations of my position as reg-	ed agent and agree to act in this capacity. I furth our and complete performance of my duties, and istered agent as provided for in Chapter 605, F., registered office address, Shereby confirm that change.	Lam familie S, Or, if this	ir with docia	and nent is

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			□ Add
			□ Remove
			□ Remove
			Add
			Remove
	<del></del>		Add

). If amending any other information, enter change(s) here: (Attach additional	d sheets, if necessary.)
**************************************	· · · · · · · · · · · · · · · · · · ·
·	
	**************************************
Effective date, if other than the date of filing:	(optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be a the date this document is filed by the Florida Department of State (gualancia) and	iore than 90 days after
the date this document is filed by the Florida Department of State of classification and Dated Innuary 15 2014	sore than 90 days after
the date this document is filed by the Florida Department of State Quality States   Dated	nore than 90 days after
the date this document is filed by the Florida Department of State Qualification and Dated	
the date this document is filed by the Florida Department of States (Registrational)  Dated	

Page 3 of 3

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