L13000102542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2015 OCT 30 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOV 02 2015
J. HARRIS

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: GRITREADY, 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:

JHOANNY CARDENAS
Name of Person

KABA CONSULTING, INC
Firm/Company

1655 EAST HWY 50 SUITE 203
Address

CLERMONT, FL 34711
City/State and Zip Code

jhoanny@kabaconsulting.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JHOANNY CARDENAS at (352) 243-8460
Name of Person — Area Code — Daytime Telephone Number

Enclosed is a check for the following amount:

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

GRITREADY, 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 07/19/2013 and assigned Florida document number L13000102542.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

2019 OCT 30 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

8445 Morning Drive
Brooksville, FL 34601

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

8445 Morning Drive
Brooksville, FL 34601

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: KABA CONSULTING, INC

New Registered Office Address: 1655 EAST HWY 50 SUITE 203
Enter Florida street address

CLERMONT, **Florida** 34711
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 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

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 Member

Title	Name	Address	Type of Action
MGR	GINO COLLURA	12322 WOODLANDS CIRCLE	☐ Add
		DADE CITY, FL 33525	■ Remove
			☐ Change
MGR	DEAN A COLLURA	8331 SWISS CHARD CIRCLE	☐ Add
		LAND O LAKES, FL 34637	■ Remove
			☐ Change
AMBR	SAFETYCORPS, LLC	12322 WOODLANDS CIRCLE	■ Add
		DADE CITY, FL 33525	☐ Remove
			☐ Change
AMBR	MAUI BAY, LLC	6043 VALLEY SPRINGS AVE	■ Add
		BROOKSVILLE, FL 34601	☐ Remove
			☐ Change
AMBR	MCHICK HOLDINGS, LLC	5312 VALLEY VIEW DRIVE	■ Add
		BROOKSVILLE, FL 34601	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated 10/27, 2015.

Gino Calleros
Signature of a member or authorized representative of a member

Gino Calleros
Typed or printed name of signee

FILED
2015 OCT 30 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA