

L13000138534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

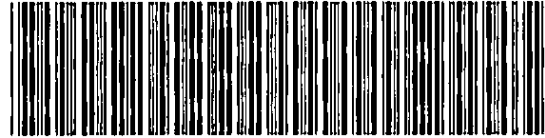
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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The Gleissner Family Trust LLC

The Gleissner Family Trust LLC
610 Warren Street, Unit 4C
Brooklyn NY 11217

212-666-9000 Phone
212-656-1828 Fax

The Gleissner Family Trust LLC | 610 Warren Street Unit 4C | Brooklyn NY 11217

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

Leni Ambayan
leni@corp.bigfoot.com

October 14, 2020

RE: Change of Registered Agent Address

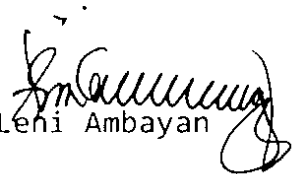
To Whom It May Concern:

Enclosed herewith are the duly signed form for change of registered agent address for file number L13000138534 and check for payment amounting to \$25.00.

Should you have questions, please feel free to send an email to leni@corp.bigfoot.com

Best regards,

The Gleissner Family Trust LLC


Leni Ambayan

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Gleissner Family Trust 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:

Michael Gleissner

Name of Person

The Gleissner Family Trust LLC

Firm/Company

610 Warren Street, Unit 4C

Address

Brooklyn NY 11217

City/State and Zip Code

filing-US-FL@moas.com

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

For further information concerning this matter, please call:

Michael Gleissner

Name of Person

at (212) 666-9000

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

The Gleissner Family Trust 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 October 1, 2013 and assigned
Florida document number L13000138534.

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."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

610 Warren Street, Unit 4C

Brooklyn NY 11217

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

610 Warren Street, Unit 4C

Brooklyn NY 11217

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:

Michael Gleissner

New Registered Office Address:

1601 Harrison Street

Enter Florida street address

Hollywood, Florida 33020

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Michael Gleissner	246 West Broadway	<input type="checkbox"/> Add
		New York NY 10013	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Michael Gleissner	610 Warren Street, Unit 4C	<input checked="" type="checkbox"/> Add
		Brooklyn NY 11217	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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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 October 14, 2020

Signature of a member or authorized representative of a member

Michael Gleissner
Typed or printed name of signee

