L13000139318

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COVER LETTER

TO: **Registration Section Division of Corporations** 18 GCD BRIG 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: ROBERT J. NABRZESKI, JR. Name of Person Firm/Company 2330 NE 28 STREET LIGHTHOUSE POINT, FL 33064 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROBERT J. NABRZESKI, JR. at (609) 828-4100 Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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

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

18 GCD BRIG 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 10/03/13	and assigned
Florida document number <u>L13000139318</u>	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
3201 BRIG LLC		
The new name must be distinguishable and end with the words	Limited Liability Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	DRESS)	
		2014 FI
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	***	10 To
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		FFS BO
B. If amending the registered agent and/or registered agent and/or the new registered office ac		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
_	, Florid	a
	City	Zip Code
New Registered Agent's Signature, if changing Registe	red 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

Authorized Member being added or removed from our records: MGR = Manager AMBR = Authorized Member Title Name **Type of Action Address** 2330 NE 28 Street DIANE NABRZESKI **AMBR** Lighthouse Point, FL 33064 GRemove □ Add □ Remove ☐ Add □ Remove ☐ Remove

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or

ective effecti date th	date, if other than the date of filing: (optional) e date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)
e date th	date, if other than the date of filing:
e date th	date, if other than the date of filing:
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Filing Fee: \$25.00

