L13000148247

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	(Add	dress)	
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2014 OCT 20 P 4: 48
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

B. BOSTICK 0CT 2 1 2014

COVER LETTER

TO: Registration Se Division of Cor			5
SUBJECT: GL'S	ombrero I, LL0		
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Adam Green	nberg	
		Name of Person	
		Firm/Company	
	3193 Royal	Palm Avenue	
		Address	
	Miami Beac	h, Florida 33140	
·	agreenberg@ngl	City/State and Zip Code (f.COM) to be used for future annual report notific	ation) CO T
For further information c	concerning this matter, please co	·	ATTA OCT 2
Adam Gree	enberg	ar 305, 350-09	27 ETARY OF S
	f Person	Area Code Daytime	SECRETARY OF STATE A SEEPHONE Number LORIDA
Enclosed is a check for the	he 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

ARTICLES OF AMENDMENT OT ARTICLES OF ORGANIZATION **OF**

GL SOMBRERO I, LLC			
(Name of the Limit	ted Liability Compa (A Florida Limited)	ny as it now appears o Liability Company)	n our records.)
The Articles of Organization for this Limited L Florida document number L13000148247	iability Company	were filed on 10/2	1/2013 and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here	:
The new name must be distinguishable and end with the	words "Limited Liab	oility Company," the des	ignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	3193 Royal Pa	alm Avenue
(Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Miami Beach,	Florida 33140
		3193 Royal Palm Avenue Miami Beach, Florida 33140	
Name of New Registered Agent:	Adam Gree	_	
New Registered Office Address:	3193 Roya	l Palm Avenue	
			street address
	Miami Bea		, Florida <u>33140</u>
		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, Lherenty confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent Signature of New Registered Agent

Page 1/of 3

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
	-		□ Add
			Remove
			□ Add
			□ Remove
			Remove
		.	Add
			□ Remove
			☐ Remove

If amending any other information, enter change(s) here: '(Atta	ach additional sheets, if necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date	(optional) and cannot be more than 90 days after
the date this document is filed by the Florida Department of State)	
Dated (C) (7	
Signature of a member or authorized re	presentative of a member
Acar Creen	ber(
Typed or printed name	

Page 3 of 3

Filing Fee: \$25.00

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SECRETARY OF STATE
AND AHASSEE, FLORIBA



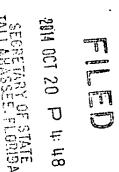
FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2014

ADAM GREENBERG 3193 ROYAL PALM AVENUE MIAMI BEACH, FL 33140

SUBJECT: GL SOMBRERO I, LLC

Ref. Number: L13000148247



We have received your document for GL SOMBRERO I, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 614A00021501

Barbara Bostick Regulatory Specialist II

www.sunbiz.org