

L13 000158864

(Requestor's Name)

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2022 FEB - 7 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FL 32310

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GLOBAL DRYWALL SERVICES 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:

GLORIA ANGELICA GOMEZ

Name of Person

GLOBAL DRYWALL SERVICES LLC

Firm/Company

1 ALHAMBRA PLAZA STE PH FLOOR

Address

MIAMI, FLORIDA 33134

City/State and Zip Code

MANAGEMENT@GDS-FL.COM

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

For further information concerning this matter, please call:

GLORIA ANGELICA GOMEZ

954
at ()

495-4400

Name of Person

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**

FILED

2022 FEB -7 AM 8:58

GLOBAL DRYWALL SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 11/12/2013 and assigned Florida document number L13000158864.

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)

GLORIA ANGELICA GOMEZ

1 ALHAMBRA PLAZA STE PH FLOOR

MIAMI, FLORIDA 33134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1 ALHAMBRA PLAZA STE PH FLOOR

MIAMI FLORIDA 33134

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:

GLORIA ANGELICA GOMEZ

New Registered Office Address:

1 ALHAMBRA PLAZA STE PH FLOOR

Enter Florida street address

MIAMI

City

Florida 33134

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>
AMBR	EVELYN ELIANA QUINTERO	3600 RED RD STE 602B	<input type="checkbox"/> Add
		MIRAMAR FL 33025	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	GLORIA ANGELICA GOMEZ	1 ALHAMBRA PLAZA STE PH FLOOR	<input checked="" type="checkbox"/> Add
		MIAMI FL 33134	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

[illegible]

01.03.2021

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.

Dated JANUARY 3RD

2021

Signature of a member or authorized representative of a member

GLORIA ANGELICA GOMEZ

Typed or printed name of signee