

# L14000006216

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

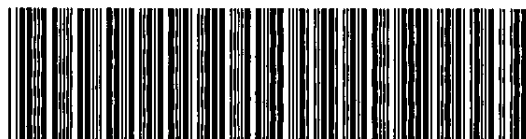
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N. Gulligan JUN 23 2014

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Genetic Pathways L.L.C. *Gerry St. Godard L.L.C.***  
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:

**Rachael St Godard**

Name of Person

**Genetic Pathways L.L.C.**

Firm/Company

**3080 Estates Drive**

Address

**Pompano Beach, Florida, 33069**

City/State and Zip Code

**aservant4him@gmail.com**

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

For further information concerning this matter, please call:

**Rachael St Godard**

Name of Person

**954 332-8191**

at ( )  
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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2014 JUN 23 AM 11: 29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Gerry St Godard L.L.C.

(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 January 13, 2014 and assigned  
Florida document number L14000006216.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Genetic Pathways L.L.C.

The new name must be distinguishable and end with 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)

Rachael St Godard

3080 Estates Drive

Pompano Beach, Florida, 33069

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

same

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:

Rachael St Godard

New Registered Office Address:

Enter Florida street address

Florida

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.

Rachael St Godard  
If Changing Registered Agent, Signature of New Registered Agent

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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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mgr	rachael st godard	3080 Estates Drive	<input checked="" type="checkbox"/> Add
		Pompano beach, fl. 33069	<input type="checkbox"/> Remove

AMBR	Gerald St. Godard	3080 Estates Dr	<input checked="" type="checkbox"/> Add
		Pompano Bch FL	<input type="checkbox"/> Remove
		33069	

			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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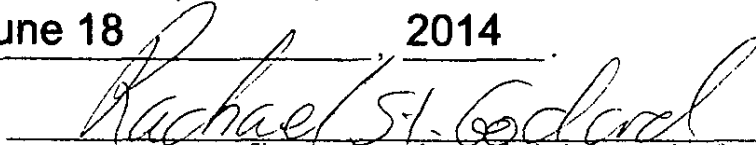
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated June 18, 2014



Signature of a member or authorized representative of a member

**Rachael St Godard**

Typed or printed name of signee

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2014 JUN 23 AM 11: 29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA