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PICK-UP	☐ WAIT	MAIL
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#		GGERBERRY PROPERTIES	, LLC	
SUBJ	ECT:	Name of Lim	ited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		Lawrence E. Fuentes		
			Name of Person	
		Fuentes and Kreischer, P.A	4.	
		·	Firm/Company	
		1407 W. Busch Boulevard	i ,	
			Address	
	•	Tampa, Florida 33612		
			City/State and Zip Code	
		lef@fklaw.net		
		E-mail address: (to be used for future annual report notific	cation)
For fu	rther information co	oncerning this matter, please co	all:	
Lawro	ence E. Fuentes		813 933-6647 at ()	
	Name of	Person		Telephone Number
Enclos	sed is a check for th	e following amount:		
■ \$2	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

Company as it now appe imited Liability Company	ars on our records.)	
	04/08/0014	and assigned
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	7. 21.07	
Enter Flo	orida street address	
	, Florida _	
City		Zip Code
	d liability company de Liability Company," the SS)	d liability company here: d Liability Company," the designation "LLC" or the SS) red office address on our records, entes here: Enter Florida street address , Florida

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>	Address	Type of Action
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Page 3 of 3

Filing Fee: \$25.00