L140000 86239

(Requ	iestor's Name)		
(Addre	ess)	<u> </u>	
(Addr	ess)		
(City/s	State/Zip/Phon	e #)	
PICK-UP	WAIT	MAIL	
(Busin	ness Entity Na	me)	
(Document Number)			
Certified Copies	Certificate	s of Status	
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SECREBARY OF STATE



MAR 2.2 2016 J. HARRIS

COVER LETTER

TO: Registration S Division of Cor			
GBHMS /			
you, et .	Name of Lim	ated Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondence	ondence concerning this matter	to the following:	
	Elias Giannakopoulos		
		Name of Person	
	Ship Supply		
		Firm/Company	
	10800 NW 103rd Street		
	100 mm	Address	**************************************
	Miami, FL 33178		
	Files CVC shirana sans	City/State and Zip Code	
	EliasG@shipsup.com E-mail address: (to be used for future annual report notif	ication)
For further information of	concerning this matter, please c	all;	
Elias Grannakopoulos		305 681-7447	
Name o	of Person		Telephone Number
Enclosed is a check for t	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 TO ARTICLES OF ORGANIZATION OF

GBHMS Air, LLC					
(Name of the Lim	ted Liability Compa (A Florida Limited I	nny as it now appears on our re Liability Company)	ecords.)	_	
The Articles of Organization for this Limited I Florida document number $\frac{L14000086239}{L14000086239}$	Liability Company	were filed on 05/28/2014	and	d assigned	
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	1 nl 1 N d 1 N l	The Common Pale of science	91 1 C ²⁰ on the address into	on ed. 1. C. "	
		10800 NW 103rd Street	Lix of the appreviation	П Б.Б.С.	
Enter new principal offices address, if applicable:			<u> </u>		
(Principal office address MUST BE A STREET ADDRESS)		Miami, FL 33178	70	元 元	
			A Table And the	വ	
Enter new mailing address, if applicable:		10800 NW 103rd Street	7.4	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		Miami, FL 33178	7.5	- Benedi	
			E E	ţ,	
			3>		
B. If amending the registered agent and registered agent and/or the new registered of			cords, <u>enter the na</u>	me of the n	
Name of New Registered Agent:	Elias Giannakopoulos				
New Registered Office Address:	10800 NW 103rd Street				
rest registered office readess.	Enter Florida street address				
	Miami	Miami . Florid		da <u>33</u> 178	
		City	Zip C	Tode	
New Registered Agent's Signature, if changing	Registered Agent:				
I hereby accept the appointment as register provisions of all statutes relative to the proj	ed agent and agr	ree to act in this capacity.	I further agree to c	omply with t	
accept the obligations of my position as reg					
being filed to merely reflect a change in the					

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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>	Type of Action
AMBR	Ship Supply of Florida	15065 NW 7th Ave	
		Miami, FL 33168	≡ Remove
AMBR	Elias Giannakopoulos	10800 NW 103rd Street	_■ Add
		Miami, FL 33178	□ Remove
			Change
AMBR	Christian Giannakopoulos	10800 NW 103rd Street	■ Add
		Miami, FL 33178	7.0
			Change
			Remove T
			☐ Change
			☐ Remove
			☐ Change
			Add
			☐ Remove
			□ Change

		enter change(s) here: (A		if necessary.)	
					
					_
٠. بغرور					
- Andrew Control					
		- Andrews			
			201 <u></u>		

Note: If the da	e, if other than the date of e is listed, the date must be speate inserted in this block do lective date on the Departm	of filing: ecific and cannot be prior to date ses not meet the applicable seem of State's records.	e of filing or more than 90 do statutory filing requiremen	(optional) ys after filing.) Pursuant to nts, this date will not b	o 605.0207 (3)(be listed as the
	ecifies a delayed effe lay after the record is	ctive date, but not an s filed.	effective time, at 12	$2:01$ a.m. on the ϵ	earlier of:
Dated	asch 17	2016			
	Telle Selle		- 		
		ure of a member or authorized	representative of a member	N.S.	<u></u>
Elia ——	as Giannakopoulos	Typed or printed nan	ne of signee	> 5 - 5	
		•			න ී
		Page 3 of	f 3	<u> </u>	3 . 4
		Filing Fee: S	\$25.00	STATE ORIDA	-: 45