# 1400012996

(Requestor's Name)			
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K.SALY EXAMINER NOV 23 2015

# **COVER LETTER**

TO:	Registration Sec Division of Corp			
	Genesis Par	•		
SUBJI	ECT:	Name of Limi	ted Liability Company	<del> </del>
The en	closed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please	return all correspon	ndence concerning this matter t	to the following:	
		George Lambro		
			Name of Person	<u> </u>
		Genesis Partners, LLC		
			Firm/Company	
		10299 Southern Blvd.		
			Address	
		Royal Palm Beach, FL 334	21	
		gwlambro@yahoo.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notif	cation)
For fu	ther information co	oncerning this matter, please ca	d1;	
Georg	e Lambro		561 9061811	
	Name of	Person	at ()	Telephone Number
Enclos	ed is a check for th	e following amount:		
<b>■</b> \$2	5.00 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

# TO ARTICLES OF ORGANIZATION **OF**

ARTICLES OF O	RGANIZATION
Ol	F CLEAN
e de la companya de	2015 NOV - L
Genesis Partners, LLC	70 PM 5
(Name of the Limited Liability Compan (A Florida Limited Li	RGANIZATION  F  20/5 NOV 20 PM 5: 33 iability Company)
The Articles of Organization for this Limited Liability Company v Florida document number	were filed on August 19, 2014 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and contain the words "Limited Liability	ty 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	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

Zip Code

### or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	George Lambro	10299 Southern Blvd.	Add
		Royal Palm Beach, FL 33421	Remove
			☐ Change
MGR ———	Renee Galizio	10299 Southern Blvd.	
		Royal Palm Beach, FL 33421	■ Remove
			☐ Change
	<del></del>		Add
		4=	□ Remove
			Ghange  ALLARIAN Remove  Remove
			Change  Add  Remove
			Change
			□ Add
			☐ Remove
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	S	1 2016	
Effective date, if other tha	September n the date of filing:	(op	tional)
Note: If the date inserted in	the must be specific and cannot be prior this block does not meet the applic the Department of State's records	to date of filing or more than 90 days after table statutory filing requirements, t	his date will not be listed as the
e record specifies a de The 90th day after the		ot an effective time, at 12:01	a.m. on the earlier of:
The Jour day area th	s record is fined.		
November 18 Dated	2015		
Ronei (	Signature of a member or auth	orized representative of a member	
Renee Galizio	<u> </u>		
	Typed or print	ed name of signee	

Page 3 of 3

Filing Fee: \$25.00