

L17 000 143947

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

J. Shivers JAN 07 2015

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 16, 2014

MARC GAYLORD
12000 SE DIXIE HWY
HOBE SOUND, FL 33455

SUBJECT: 38 GOMEZ, LLC
Ref. Number: L14000143947

We have received your document for 38 GOMEZ, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 514A00026609

LAW OFFICES OF
MARC R. GAYLORD, P.A.

12000 S.E. OLD DIXIE HIGHWAY
HOBE SOUND, FL 33455
TEL: (772) 545-7740
FAX: (772) 545-7782

MARC R. GAYLORD, ESQ.

December 10, 2014

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: 38 Gomez, LLC

To Whom it May Concern;

Enclosed please find the necessary form to amend the Articles of Organization for the above referenced Limited Liability Company. I have also enclosed a check in the amount of \$25 for the payment of the filing fee.

Please do not hesitate to contact me with any questions regarding the foregoing.

Sincerely,


Sara Gaylord

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 38 Gomez, 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:

Marc R. Gaylord
Name of Person

Marc R. Gaylord, P.A.
Firm/Company

12000 SE Dixie Highway
Address

Hobe Sound, FL 33455
City/State and Zip Code

Sara.gaylord@gaylordlaw.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sara Gaylord at (772) 545-7740
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

38 Gomez, LLC

(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 9/15/2014 and assigned
Florida document number L14000143947.

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 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

Florida

City

15 JAN - 6 PM 2014
SECRETARY OF STATE
TALLAHASSEE, 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 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>
MGR	Marc R. Gaylord	12000 SE Old Dixie Hwy	<input type="checkbox"/> Add
		Hobe Sound, FL 33455	<input checked="" type="checkbox"/> Remove
MGR	William A. Fisher III	1708 Circle Road	<input checked="" type="checkbox"/> Add
		Ruxton, MD 21204	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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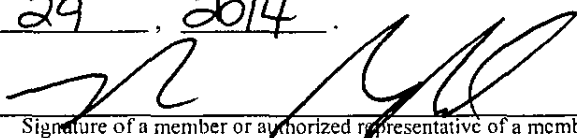
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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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 December 29, 2014.



Signature of a member or authorized representative of a member

MARC R. GAYLOR

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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