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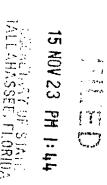
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

Division of Corporations	
SUBJECT: GGG, LCC	
SUBJECT: GGG, LCC Name of Limited Lie	ability Company
The enclosed Articles of Amendment and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to the	following:
Day G	arana
	Name of Person
Don G GGG,	
GG <u>G</u>	Firm/Company
3826 N	Scenic Hwy Address
	Address
lake W	alex FL 33898
City	/State and Zip Code
dang prus	sed for future annual report notification)
	sed to future annual report nonlication)
For further information concerning this matter, please call:	
Dan Gregoine	864 287 5424
Name of Person	at (863) 387 - 5424 Area Code Daytime Telephone Number
	,
Enclosed is a check for the following amount:	
. 4	\$55.00 Filing Fee & \$\square\$\$\$ \$60.00 Filing Fee,
Certificate of Status	Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

**Registration Section** 

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

666, 6	
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)
	ility Company were filed on 10 31 3014 and assigned
This amendment is submitted to amend the follow	
A. If amending name, enter the new name of th	ne limited liability company here:
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le: 3825 N Scenic Huy  ADDRESS) Lake Water 47 33898
(Principal office address MUST BE A STREET A	ADDRESS) Lake Water 47 33898
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO  B. If amending the registered agent and/or registered agent and/or the new registered offic	registered office address on our records, enter the name of the new
Name of New Registered Agent:	Dan Gregoire  3875 A Scamic Huy  Enter Florida street address
New Registered Office Address:	3876 N Scanic HWY
provisions of all statutes relative to the proper accept the obligations of my position as registe	City  City  Tip Code  Agent:  Agent and agree to act in this capacity. I further agree to comply with the and complete performance of my duties, and I am familiar with and red agent as provided for in Chapter 605, F.S. Or, if this document is gistered office address, I hereby confirm that the limited liability
	/

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
mek	Gene A Gerstmen	6332 Sedgeford Duive	Add
		- Lakeland, Pl 33811	Remove
			☐ Change
MGR	Dan Gregoire	3825 N. Scenic Hwy	
		Late Wales FL 33898	Remove
			Change
			Add
			Remove
			☐ Change
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Page 3 of 3

Filing Fee: \$25.00