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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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SECRETARY OF STATE

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COVER LETTER

то:	Registration Sec Division of Corp	tion orations		
SUBJE	CT: <u>Gi</u> N	Name of Lim	STMENT HOLDIN	GS LLC
		mendment and fee(s) are sub	_	
		Humberto	C BETHENCOU	27
			Name of Person Investment H	
			Firm/Company	
		345 5,00	CEAN Drive H	908
			Address	
		MIAMI E	SEACH FC 3	33139
			City/State and Zip Code County & June 12. to be used for future annual report notifica	
		E-mail address: (t	to be used for future annual report notifica	tion)
		ncerning this matter, please ca		
Hua	uberto c	BETHENCOURT	at () 495- (Area Code Daytime To	963
	Name of I	Person	Area Code Daytime To	elephone Number
Enclose	d 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 Tallahassec, 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

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)
(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 11/17/2014 and assigned Florida document numberL14000177878
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 Pagistered Agents
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address

City Florida Zincsode
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 Type of Action Address Title Name | GINDERT HOLDING CORPORATION 3455. OCEAN Drive DAdd
MIAMI BEACH, FLORIDA 33139 MGR MGR (TINNERT HOLDINGS LLC MIAMI BEACH, FLOTIDA 33139 MADO □ Remove _____ Add ☐ Remove ☐ Remove ☐ Remove

), If among	ling any other information, enter change(s) here: (Attach adattional sheets, if necessary.)
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E. Effective	e date, if other than the date of filing: (optional)
	ive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after his document is filed by the Florida Department of State)
uje daje u	
Dated	12/17/2014
	Ac Bethent
	Signature of a member or authorized representative of a member
	HUMBERTO C. BETHENCOURT
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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