

L14000 179 765

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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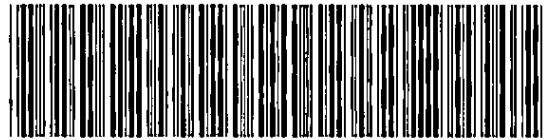
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 21 2018

S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

Document NR L14000179765

SUBJECT: \_\_\_\_\_

GSA Home CARE 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:

Monique Pollock

Name of Person

GSA Home CARE LLC

Firm/Company

2880 West Oaklandpark Blvd 206

Address

Fort Lauderdale FL 33311

City/State and Zip Code

m.pollack@live.nl

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Monique Pollock

Name of Person

at (

786 899 3264

Area Code

Daytime Telephone Number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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**

GSA Home CARE 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 2014 and assigned Florida document number 214000179765

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 contain 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)**

0221 glades Rd # 202-3  
Boca Raton FL 33434

**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:

AR kadiy kopshteyn

New Registered Office Address:

0221 glades Rd # 202-3

Enter Florida street address

Boca Raton, Florida 33434

City

Zip Code

**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.*

Registered Agent is not changed

If Changing Registered Agent, Signature of New Registered Agent

**MGR = Manager**  
**AMBR = Authorized Member**

Page 2 of 3

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

please Remove my name Monique Pollack  
I sold the company per June 1, 2018  
the new owner is from June 1, 2018 is  
Arkadiy Kopshteyn he is authorized member  
and the Registered Agent

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: June 1, 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

June 6, 2018

*Monique Pollack*

Signature of a member or authorized representative of a member

M. Pollack

Typed or printed name of signee