## L15000018424

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O SIMMONS
JUN 23 2021

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: G Set Vices LC	
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:	
Se Se Sodrace	
G7 Ser Victo LLC Firm/Company	
975 Cornell Ave	
$\frac{1}{2} \frac{1}{2} \frac{1}$	71
E-mail address: (to be used for futbre amust report notification)	
For further information concerning this matter, please call:	
Name of Person	
Enclosed is a check for the following amount:	
D \$25.00 Filing Fee	
Mailing Address: Street Address:	

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

QF: 827 19 AM 7: 16

TATION 19 AT P. 10	
(g Dervices)	
(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 onand assigne	d
Florida document number <u>L 150000 184</u> 24	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
A. If afficiently name, enter the new name of the market habitive company nere.	
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)	
The state of the s	
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 re-	zisterec
agent and/or the new registered office address here:	
Name of New Registered Agent:	
Name of New Registered Agent.	
New Registered Office Address:  Enter Florida street address	
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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = N AMBR = A	Aanager Authorized Member	· .		
<u>Title</u>	Name	Addres	21 háy 19 AM 7:15 s	Type of Action
				□Add
				Remove
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Effective date, if other than the date of filing:  (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 605.020 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.
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 cord is filed.
Dated Cay Signature of a member or authorized representative of a member
1.00

Filing Fee: \$25.00