U50000 80418

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
,

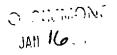
Office Use Only



500322002015

01/11/19--01001--023 *+25.00





COVER LETTER

Divi	sion of Cor	porations			
SUBJECT:	G & D HO	MES LLC			
SOBJECT.		Name of Lim	ited Liability Company		
The enclosed	Articles of a	Amendment and fee(s) are sub-	mitted for filing.		
Please return	all correspo	ndence concerning this matter	to the following:		
		GARY TRAPEO			
			Name of Person	<u> </u>	
G & D HOMES LLC					
Firm/Company 11011 Island Pine Drive					
			Address		
	Port Richey, FL 34668				
	City/State and Zip Code				
		E-mail address: (to be used for future annual report notif	ication)	
For further in	formation co	oncerning this matter, please ca	all:		
Steven K. Jor	nas, Esq.		727 846-6945		
	Name of	f Person	Area Code Daytime	Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 Fi	ling 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)	
		ING ADDRESS:	STREET/COURIE		

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

TO:

Registration Section

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G & D HOMES LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company v	vere filed on and ass	igned
forida document number 115000080418		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabil	ity company here:	
he new name must be distinguishable and contain the words "Limited Liabilit	y 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)		
Frincipal office data ess most ble A STREET ADDRESSY	*5	•
		<u> </u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off		<u>of the</u>
egistered agent and/or the new registered office address here	•	
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
	Enter Florida street address	
	Florida	<u></u>
	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.

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	DAVID BISAHA	11011 Island Pine Dr	
		D. a Disk P1 24669	
		Port Richey, FL 34668	Remove
			☐ Change
			Add
			☐ Change
			Remove
			Change
			□ Add
			☐ Remove
			Change
			Remove
			☐ Change
			□ Add
			☐ Remove
			Change

	· <u> </u>
	9
	<u> </u>
	7: 2
DECEMBER 18, 2018 Tective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date of filing or mote: If the date inserted in this block does not meet the applicable statutory filing ocument's effective date on the Department of State's records.	(optional) ore than 90 days after filing.) Pursuant to 605.02 g requirements, this date will not be listed
record specifies a delayed effective date, but not an effective t The 90th day after the record is filed.	ime, at 12:01 a.m. on the earlier
nted DECEMBER 18 2018	

Page 3 of 3

Filing Fee: \$25.00