Division of Corporations

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (650)617-6383

From:

Account Name : GREENBERG TRAURIG (WEST PALM BEACH)

Account Number : 075201001473 : (561)955-7600

Fax Number : (561)338-7099

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

SFISHER@PALMBEACHRP.COM Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

G2 INTERNATIONAL WELLINGTON, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G2 INTERNATIONAL WELLINGTON, LLC		
(Name of the Limited Liability C (A Florida Lin	ompany as it now appears on or uted Liability Company)	ir Fecards.)
The Articles of Organization for this Limited Liability Com	pany were filed on 08/21/20	15 and assigned
Florida document number L15000141070	•	
r-101102 document hamoer		,
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 designa-	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
registered agent and/or the new registered office address Name of New Registered Agent:		
No Berry LOW Aller		
New Registered Office Address:	Enter Florida str	vet address
	City	, Florida
	•	Zip Code
New Registered Agent's Signature, if changing Registered A	gent:	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacted the obligations of my position as registered agent being filed to merely reflect a change in the registered company has been notified in writing of this change.	plete performance of my d it as provided for in Chapt office address, I hereby con	uties, and I am familiar with and er 605. F.S. Or, if this document is after that the limited liability
, ii	Changing Registered Agent, S	ignature of New Registered Agent
р	age 1 of 3	OF STA

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
MBR	G2 International, LLC	625 N. Flagler Drive, #402	□ Add
		West Palm Beach, FL 33401	■ Remove
			☐ Change
MGR	Christopher T. Gannon	625 N. Flagler Drive, #402	
		West Paim Beach, FL 33401	□ Remove
			☐ Change
			Add
			□ Remove
			Change
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			□ Remove
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tive date, if other than the date of	f filing:	(ontional)
frective date is listed, the date must be speci	f filing: ific and cannot be prior to date of filing or more to	han 90 days after filing.) Pursuant to 605.0
the first inserted in this block does nent's effective date on the Department	s not meet the applicable statutory filing recent of State's records.	quirements, this date will not be listed
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