14000000164

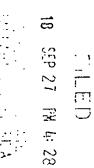
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	· · ·
(Cit	ry/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200318692722

09/27/18--01017--024 **25.00



COVER LETTER

	Registration Se Division of Cor							
	GIA & GIA	, LLC						
SUBJEC	l:	Name of Lim	ited Liability Company					
The enclo	sed Articles of	Amendment and fee(s) are sub-	mitted for filing.					
Please ret	urn all correspo	ndence concerning this matter	to the following:					
		Melanie Phillips						
		·	Maine of Person					
		GIA & GIA, LLC						
			Firm/Company					
		7302 Royal Palm Blvd						
		Address						
		Margate, FL 33063						
		City/State and Zip Code mwcpro16@gmail.com						
		E-mail address: (to be used for future annual report notifi	cation}				
For furthe	r information c	oncerning this matter, please co	all:					
Melanie Phillips			954 850-5838					
Name of Person				Telephone Number				
Enclosed	is a check for th	ne following amount:						
□ \$25.0	0 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, Ft. 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

GIA & GIA, LLC			
(Name of the Limit	ed Liability Compa (A Florida Limited I	iny as it now appears on ou Liability Company)	ir records)
The Articles of Organization for this Limited Li	ability Company	were filed on 12/29/20	and assigned
lorida document number L16000000164			. 6
his amendment is submitted to amend the follo	owing:		
. If amending name, enter the new name of	the limited liab	ility company here:	· · · · · · · · · · · · · · · · · · ·
he new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designat	ion "LLC" or the abbreviation "LL C."
nter new principal offices address, if applie	able:	7302 Royal Palm Blv	/d % 25
nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRES		Margate, FL 33063	<i>y</i>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7302 Royal Palm Blv Margate, FL 33063	vd
. If amending the registered agent and/egistered agent and/or the new registered of		<u>e</u> :	records, enter the name of the
Name of New Registered Agent:	 	- ·	
New Registered Office Address:	7302 Royal Pa		
		Enter Florida stre	vet address
	Margate		, Florida <u>33063</u>

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>	Address	Type of Action
AMBR	Melanie Phillips		Add
			Remove
		7302 Royal Palm Blvd Margate, FL 33063	E Change
AMBR	Michael D. P. Phillips	7302 Royal Palm Blvd Margate, FL 33063	
			☐ Remove
			Change
			□ Add
			<u>C</u> Remove
			Change R
			—————————————————————————————————————
			□ Remove
			Change
		<u> </u>	□ Add
			☐ Remove
			☐ Change
			□ Add
			☐ Remove
			Change

	<u> </u>							
	· -							
_								
				-				
_								
_		·-						·
_				<u>_</u>				· · · · · · · · · · · · · · · · · · ·
_								
_			<u> </u>					
								
					<u>.</u>			
Effectiv	e date, if other	than the date	of filing: _		8.71	(optional)	
<u>Note:</u> 11	ctive date is listed, t f the date inserted nt's effective date	l in this block do	es not meet	the applicable	e statutory filir	g requirement	s, this date wil	I not be listed as
	ord specifies a 90th day after			, but not a	n effective	time, at 12:	01 a.m. on	the earlier of
S Dated _	September 21,		20	018				
Dateu _	1	1	<u> </u>	- 1 / :	· _			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00