

L16000 101792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

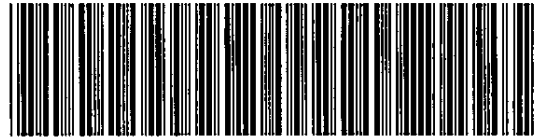
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Certified Copies _____ Certificates of Status _____

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FILED
2016 JUL 26 PM 2:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALLY
EXAMINER
JUL 29



RECEIVED

2016 JUL 26 PM 2:19

FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 7, 2016

MY CORPORATION BUSINESS SERVICES, INC.
2586 CALABASAS RD, STE. 102
CALABASAS, CA 91302

SUBJECT: 100 WEST 54TH ST. LLC
Ref. Number: L16000101792

We have received your document for 100 WEST 54TH ST. LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 016A00014277

* Our check was not included in the return package.
We have included a new check if our payment
was not deposited.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 100 WEST 54TH ST. 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:

My Corporation Business Services, Inc.
Name of Person
Firm/Company
23586 Calabasas Road, Suite 102
Address
Calabasas, CA 91302
City/State and Zip Code
processing@mycorporation.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

My Corporation Business Services, Inc. at (877) 672-6772
Name of Person Area Code Daytime Telephone Number

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**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100 WEST 54TH ST. 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 05/25/2016 and assigned Florida document number L16000101792.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GJK FL A LLC

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:

7010 N Pearl St

(Principal office address MUST BE A STREET ADDRESS)

Jacksonville, FL 32208

Enter new mailing address, if applicable:

7010 N Pearl St

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, FL 32208

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:

New Registered Office Address:

7010 N Pearl St

Enter Florida street address

Jacksonville

City

, Florida 32208

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>	<u>Type of Action</u>
AMBR	HING HUI, JODY HIU	7010 N Pearl St	<input type="checkbox"/> Add
		Jacksonville, FL 32208	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	LING HUI, GENA HIU	7010 N Pearl St	<input type="checkbox"/> Add
		Jacksonville, FL 32208	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	HUI, KWAI KWAN	7010 N Pearl St	<input type="checkbox"/> Add
		Jacksonville, FL 32208	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 ALACHUA COUNTY, FLORIDA

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

Lined area for amending information.

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TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (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 29th, 2016

Jody Hui Hing Hui
Signature of a member or authorized representative of a member

Jody Hiu Hing Hui, AMBR
Typed or printed name of signee