L16000150947

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COVER LETTER

SUBJECT:	BLANC INTERPRISE LLC	
	Name of Limited Liability Company	
The enclosed Articles	of Amendment and fee(s) are submitted for filing.	
Please return all corres	spondence concerning this matter to the following:	
	GIBSON BLANC	
	Name of Person	
	Firm/Company	
	5851 HOLMBERG ROAD, APT.1812	بسب
	Address	- I
	PARKLAND, FL 33067	17 MAR -2 PH 1: CI
	City/State and Zip Code	-0
	GIBSONBLANC@YAHOO.COM	
	E-mail address: (to be used for future annual report notification)	
For further information	n concerning this matter, please call:	<u>.</u>
GIBSON BLANC	954 825-8540 at ()	
Nam	e of Person Area Code Daytime Telephone Number	

□ \$55.00 Filing Fee &

Certified Copy

(additional copy is enclosed)

MAILING ADDRESS:

■ \$25.00 Filing Fee

□ \$30.00 Filing Fee &

Certificate of Status

TO:

Registration Section

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

STREET/COURIER ADDRESS:

□ \$60.00 Filing Fee,

Certified Copy (additional copy is enclosed)

Certificate of Status &

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GIBSON BLANC INTERPRISE LLC			
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as a Limited Liabil	it now appears on our record ity Company)	<u>(s.</u>)
The Articles of Organization for this Limited Liability C	Company were	e filed on 08/12/2016	and assigned
Florida document number L16000150947	•		
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the lim</u>	ited liability	company here:	
GIBSON BLANC ENTERPRISES LLC			
The new name must be distinguishable and contain the words "Lim	nited Liability C	ompany," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	95	82 TOWN PARC CIRCLE S	S
Principal office address MUST BE A STREET ADDI	RESS)	ARKLAND, FL 33076	300
			3 3
Enter new mailing address, if applicable:		82 TOWN PARC CIRCLE S	S 2
(Mailing address MAY BE A POST OFFICE BOX)		ARKLAND, FL 33076	* 7
B. If amending the registered agent and/or regis		address on our records	s, enter the name of the nev
registered agent and/or the new registered office add	ress nere:		
Name of New Registered Agent:			
New Registered Office Address: 9582	TOWN PARC	CIRCLE S	
new registered Office Address.		Enter Florida street addres.	is ———
PARK	LAND	. Fle	orida 33076
		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>	Address	Type of Action
CEO	GIBSON BLANC	9582 TOWN PARC CIRCLE S	□ Add
		PARKLAND, FL 33076	□ Remove
			Change
			Add
			□ Remove
			Change
			Add
			□ Add 2 33
			☐ Change
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ffective date, if other than than than effective date is listed, the date in ote: If the date inserted in this occument's effective date on the	ust be specific block does no	and cannot be proof to the app	licable statute	ing or more that ory filing requi	(optiona 190 days after fili rements, this da	ng.) Pursuant to	605.0207 (3 listed as th
e record specifies a delay The 90th day after the re			not an effe	ctive time,	at 12:01 a.n	າ. on the ea	rlier of:
ated		2017	·				
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Filing Fee: \$25.00