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SECRE LARY OF STATE ALIASSEE, FLORIDA

D. SCOTT DEC 6 2016

## **COVER LETTER**

TO: Registration Section Division of Corporations	*\ *\
SUBJECT: GCK JLC Name of L	Limited Liability Company
The enclosed Articles of Amendment and fee(s) are s	
Please return all correspondence concerning this matt	ter to the following:
Gregor	V C. Kepen Name of Person
GCK, L	Firm/Company
26785	McLaughlin Bud
Bonita Sp	Gfty/State and Zip Code
E-mail address	s: (to be used for future annual report notification)
For further information concerning this matter, please	e call:
Gregor C. Kepen	at (389) 821-4744  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	RETAIN FILE
\$25.00 Filing Fee \$\square\$ \$30.00 Filing Fee \$\text{Certificate of Status}\$	Certified Copy (additional copy is enclosed)  S55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
MAILING ADDRESS:	STREET/COURIER ADDRESS:

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

þ

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GCK, LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.1600184955.  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	
Enter new principal offices address, if applicable:	26785 McLaughlin Blvd.
(Principal office address MUST BE A STREET ADDRESS)	Bonita Springs, FL 34134
Enter new meiling address if applicables	26785 McLaughlin Blvd.
Enter new mailing address, if applicable:	Booita Socials El 241311
(Mailing address MAY BE A POST OFFICE BOX)	bama springs, 12 s-113-1
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:	fice address on our records, enter the name of the new
New Registered Office Address:	
	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	City Sir Code T
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am jam <del>ular with a</del> nd provided for in Chapter 605, F.S. Or, if this document is

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					
			□ Add		
		<del></del>	□ Remove		
			☐ Change		
		·	□ Add		
			☐ Remove		
			☐ Change		
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			ORIUM See		

\_□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
The Principal Address and Mailing Address were	
amended in Section A. There also needs to be	
an amendment for the address of the Authorized	
Person Gregory C. Kepen. His new address	
needs to be amended to the followind:	
26785 McLoughlin Blvd., Bonita Springs,	
Florida 34134	
	, '
EX S	
THE REST	
See - In	
TO TO THE O	
E. Effective date, if other than the date of filing:  (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.) Pursual 40 605.0297 (3)(6)  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 November 28, 2016.	
Signature of a member or authorized representative of a member	
Joel Threlkeld Esq.  Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00