

216000204300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

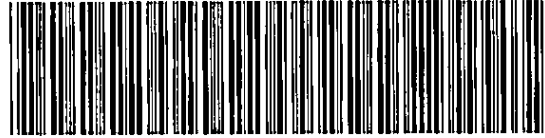
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000315031700

06/28/18--01017--015 **25.00

ALABAMA JUDICIAL

2018 JUL 12 P 12:30

FILED

7/18/18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 29, 2018

GARY GENTILE
6706 PINE ISLAND RD
TAMARAC, FL 33321

SUBJECT: THE GJ GENTILE GROUP LLC
Ref. Number: L16000204300

We have received your document for THE GJ GENTILE GROUP 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):

Please revise Section A of application.

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.

Dionne M Scott
Regulatory Specialist II

Letter Number: 118A00013582

FILED

2018 JUL 12 PM 3:30

Division of Corporations

REC-1
2018 JUL 12 AM 10:01
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

THE GJ Gentile Group 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:

Gary Gentile
Name of Person

The GJ Gentile Group LLC
Firm/Company

6706 Pine Island Rd
Address

TAMPA FL 33321
City/State and Zip Code

GJgentile@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gary Gentile
Name of Person

at 954
Area Code

397-9251
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

TALLAHASSEE, FLORIDA

2013 JUL 12 PM 12:30

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

THE G. S. Gentile Group 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 11/3/16 and assigned
Florida document number L 16000204300

This amendment is submitted to amend the following: L 16000204300

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

~~THE G. S. Gentile Group 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:

(Principal office address MUST BE A STREET ADDRESS)

6706 Pine Island Rd
Tampa, FL 33622

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Gary Gentile
6706 Pine Island Rd
Tampa, Florida 33622

Enter Florida street address

City

Florida

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.

[Signature]
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

Title	Name	Address	Type of Action
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President	GARY GENTILE	6706 PINE ISLAND RD TAMMING H. 33321	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
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MANAGER	GARY GENTILE	6706 PINE ISLAND RD TAMMING H. 33321	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
---------	--------------	---	--

FILED
JAN 12 12 30
ALABAMA SECRETARY OF STATE

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

PLEASE CHANGE THE

TITLE FROM PRESIDENT

TO MANAGER

TITLE MANAGER

FILED
2018 JUL 12 P 2:30
ALABAMA SECRETARY OF STATE

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)

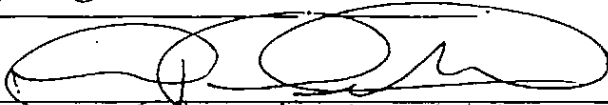
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

6-25-18



Signature of a member or authorized representative of a member

GARY BENTLEY

Typed or printed name of signee