

L160000216899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

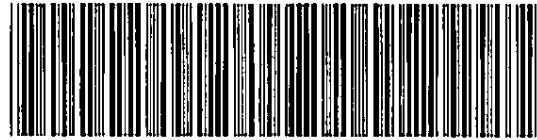
(Business Entity Name)

(Document Number)

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2022 SEP 19 AM 8:46
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Garjos, 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:

Marie-Josée Paulzak

Name of Person

Garjos, LLC

Firm/Company

171 Eldredge Road

Address

Fort Walton Beach, FL 32547

City/State and Zip Code

GPaulzak@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARY Paulzak

Name of Person
at (850) 240-9555

Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

Garjos, 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 November 29, 2016 and assigned
Florida document number L16000216899.

This amendment is submitted to amend the following:

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

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)

114 Curry Rise Ct

Deland, FL 32724

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

114 Curry Rise Ct

Deland, FL 32724

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:

Gary M Paulzak

New Registered Office Address:

114 Curry Rise Ct

Enter Florida street address

Deland,

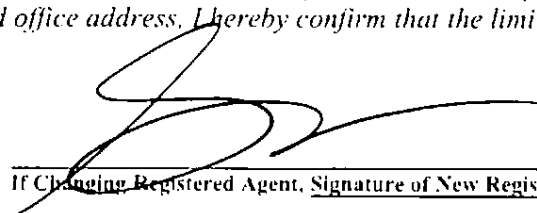
City

Florida 32724

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

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SECRETARY OF STATE
TALLAHASSEE, FL

FILED

- 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>
MGR	Gary Paulzak	114 Curry Rise CT	<input checked="" type="checkbox"/> Add
		Deland, FL 32724	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Gary Paulzak	114 Curry Rise CT	<input checked="" type="checkbox"/> Add
		Deland, FL 32724	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Marie-Josce Paulzak	171 Eldredge Rd	<input type="checkbox"/> Add
		Fort Walton Beach, FL 32547	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Marie-Josce Paulzak	171 Eldredge Road	<input type="checkbox"/> Add
		Fort Walton Beach, FL 32547	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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(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)

Typed or printed name of signee