Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DES-MATT, INC Account Number : I20180000078 Phone : (352)223-3911 Fax Number : (863)318-8218

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: esme.shanks@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GS & GL INVESTMENTS, LLC

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Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GS & GL INVESTMENTS, 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 03/16/2017 and assigned Florida document number <u>L17000060807</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." N/A Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A 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: N/A Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

Florida _

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>	Name	Address	Type of Action
MGR	GABRIELE SPAGNOLO	5751 LOS PALMA VISTA DR	□ Add
		ORLANDO, FL 32837	□Remove
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 If the date inserted in this block does not meet u 	ne applicable s	tatutory filing re	equirements, this o	iate will not be list
iment's effective date on the Department of State's	records.			
ord specifies a delayed effective date, but not an ef	fective time, a	i 12:01 a.m. on	the earlier of: (b)	The 90th day afte
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Signature of a member	er or withouted	representative of	n member	············