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(Re	questor's Name)	
· (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration So Division of Co			
SUBJECT:	GMG	Realty "	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	<u> Hen</u>	neth Moore	
		MG Realty LLC	
	7800 F	Point Meadows	5 Dr Apt 1416
	Jackson	ville, Fl 322 City/State and Zip Code	-S6
	9Mgre E-mail address: (1	o be used for future annual report notifi	(cation)
For further information c	oncerning this matter, please ca	ll:	
<u>Henneth</u>	Moore .	at (609) 2/3	- 7770 Telephone Number
. vane v		Area code Daytine	retephone (vulnoe)
Englosed is a check for the	ne 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GMG Realty	LLC	
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co		nd assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable:		<u>.</u>
(Principal office address MUST BE A STREET ADDRI	ESS)	
		17
	***	5.
Enter new mailing address, if applicable:		N 45m
(Mailing address MAY BE A POST OFFICE BOX)		
Maning marts mai buar 1031 011 (E BOA)		1 200
		<u>ယ္</u> ႏ
B. If amending the registered agent and/or registe	ered office address on our records enter the no	No of the rev
registered agent and/or the new registered office addre	ess here:	ame or the new
		
Name of New Registered Agent:		
New Registered Office Address:		
<u> </u>	Enter Florida street address	· · · · ·
	, Florida	
	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

Title AMBR	Name George Gipson III	Address 66526 4th St Vero Beach Fl, 32968	Type of Action Add
		Vero Beach Fl, 32968	☐ Remove
			Change
			□ Add
			Remove
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			_□ Change

	nending any other information, enter change(s) here: (Attach additional sheets, if necess	. 37	
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	·	·	
			
Note: locur e re	ctive date, if other than the date of filing:	ate will not be liste	ed as 1
ated	March 23 . 2017.		
	Kenth Word		
	Signature of a member or authorized representative of a member	7	4.7
	Kenneth Moore	MAR	51
	Typed or printed name of signee	27	7. (3.
		PH	
	Page 3 of 3	ယ္	

Filing Fee: \$25.00