L17000073856

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COVER LETTER

TO:	Registration Se Division of Cor			
411.115.6		ERICA LLC		
SUBJ	ECT:	Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		BENAN SANLIFR		
			Name of Person	······································
		GENC AMERICA LLC		
			Firm/Company	
		1041 W BRANDON BLV	b	
			Address	
		BRANDON, FLORIDA 33	3511	
			City/State and Zip Code	
		BENAN@MTECHAIRLES	SS.COM to be used for future annual report notifi	auti m)
For fu	irther information c	n-man address, to oncerning this matter, please ea		Carony
	AN SANLIER		813 685-1600	
	Name o	Person	at ()	Telephone Number
Enclos	sed is a check for th	ne following amount:		
≡ S2	25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional 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 Clitton Building 2001 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GENC AMERICA LLC	
(Name of the Limited Liability Company as it now appears on A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company were filed on 4/3/201 document number 1.17000073856	7 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	2
The new name must be distinguishable and contain the words "Limited Liability Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
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 ou registered agent and/or the new registered office address here:	r records, enter the name of the n
Name of New Registered Agent:	#ŋ #;
New Registered Office Address:	
Enter Florida s	
City	, Florida Zip Code
New Registered Agent's Signature, if charging Registered Agent:	
I hereby accept the appointment is registered agent and agree to act in this cape provisions of all statutes relative to the proper and complete performance of my accept the obligations of my position as registered agent as provided for in Chapbeing filed to merely reflect a change in the registered office address, I hereby company has been notified in writing of this change.	duties, and Lain familiar with and open 605 A.S. Or, if this document is
	Simplify of You Danistared 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	GILLELAND, KEVIN.	1041 W BRANDON BLVD	
		BRANDON, FL 33511	■ Remove
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			D Add
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					3.
		_			NA.
Effective date, if other than the d	4/12/201	4	(optio	÷ nal)	क ा जा
(If an effective date is listed, the date must be Note: If the date inserted in this bloc document's effective date on the Dep	se specific and cannot be pi k does not nicet the app	dicable statutory filing	re than 90 days after t	iling.) Pursua	nt to 605.020 be listed a
the record specifies a delayed of the poor the following the feconor in the fecon	effective date, but rd is filed.	not an effective ti	me, at 12:01 a.	.m. on the	e earlier (
Dated April 12,	2017	· <i>'</i> /			
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	ignature of a arcinber of a	uthorized representative of	il`a member		

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Filing Fee: \$25.00