# 11700088558

(Re	questor's Name)		
(Ad	dress)		
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(Cit	y/State/Zip/Phone	e #)	
PłCK-UP	☐ WAIT	MAIL	
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SEGRETARY OF STATE
ALLAHASSEE, FLORIDA

K. SALY MAR 1 3 2018

### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: GUSTAVOSON Services 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:
Dorllo Gentz Name of Person
Firm/Company
11270 Kanch Creek Terr. #112
Bradenton F2 34211 City/State and Zip Code
E-mail address: to be used for future annual report notification)
For further information concerning this matter, please call:
Divilo Get 7 at 941, 243-8797  Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Scriffied Copy (additional copy is enclosed)  \$30.00 Filing Fee Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, 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 it now appears on our records The Articles of Organization for this Limited Liability Company were filed on Florida document number L1700088558 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 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:

#### 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 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

$\mathbf{AMBR} = A$	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Adam Evans	10413 Grail Ave	Add
		Englewood, Fr. 34221	-
			Change
MGR	Kennedi Evans	10413 Grail Ave.	Add
		Englewood, Fr 3422	U □ Remove
	5		☐ Change
MGR	Dorsen Gentz	11270 Ranch Creek Terr.	) // Zada
		Bradenton, Fr 34211	□ Remove
			Change
			Add 78
			Remove
			Change I
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			Add 46
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ocument's effecti	ve date on the D	epartment of St	ate's records.				
e record speci The 90th day			ate, but not	an effective t	ime, at 12:01	a.m. on the ea	arlier of:
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Typed or printed name of signee

Filing Fee: \$25.00