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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

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TO: Registration S Division of Co			
GS HC Gr SUBJECT:	oup, LLC		
SOBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	f Amendment and fec(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jonathan Globerman		
		Name of Person	
		Firm/Company	
	11 South Swinton Avenue		
		Address	
	Delray Beach, FL 33444		
		City/State and Zip Code	——————————————————————————————————————
	j.globerman@gmail.com	to be used for finure annual report notifi	ication)
For further information	concerning this matter, please c	•	curvity.
Jonathan Globerman		561 573-0085	
Name	of Person	at ()	Telephone Number
Enclosed is a check for	the following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Fiting Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
MAI	LING ADDRESS:	STREET/COURII	ER 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 Tallahassce, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GS HC Group, LLC				
(Name of the Line	ited Liability Company as it now appears (A Florida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited I	Liability Company were filed on 07/	20/17	_ and assigne	:d
Florida document number	· · · · · · · · · · · · · · · · · · ·			
This amendment is submitted to amend the following	llowing:			
A. If amending name, enter the new name	of the limited liability company he	<u>re</u> :		
The new name must be distinguishable and contain the	words "Limited Liability Company," the do	esignation "LLC" or the abbrev	riation "L.L.C."	•
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
			<u> </u>	
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE	<u> </u>		-\$\vec{\psi}_{-\psi_0} - \frac{1}{2} \text{is}	
			- 8	
D			<u> </u>	, "i
B. If amending the registered agent and registered agent and/or the new registered of		our records, enter the	<u>cname of t</u>	he new
	whice dade cas here.	•	2	
Name of New Registered Agent:	Jonathan Globerman	্র ক্র	To an analysis of the second	ا بعد ع
New Registered Office Address:	11 South Swinton Avenue	हाँ रेक	9	
	Enter Flori	da street address		
	Delray Beach	, Florida ³³⁴⁴⁴		
	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 Chauging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Address	Type of Action
MGR	Eden Capital, LLC	11 South Swinton Avenue	Add
		Delray Beach, FL 33444	■ Remove
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			Петюче
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ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 da	(optional)	5.020
te: If the date inserted in this block does not meet the applicable statutory filing requirement amount's effective date on the Department of State's records.	nts, this date will not be liste	ed a
record specifies a delayed effective date, but not an effective time, at 12	2:01 a.m. on the earlie	er o
The 90th day after the record is filed.		
ted,		
J Lila		
Signature of a member or authorized representative of a member		
	EXERNA)	

Page 3 of 3

Filing Fee: \$25.00