# 117000234310

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600319802406

10/22/18--01015--002 \*\*25.00

FILED

18 OCT 22 PH II: 40

SLOILES A STATEMENT

CI 3 () 2018

### **COVER LETTER**

GMK COI SUBJECT:	NSTRUCTION SERVICES, L	LC	
SUBJECT.	Name of Lim	ited Liability Company	19
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	George Makhlouf		
		Name of Person	
	9707 cinnamon court	Firm/Company	
	Parkland, FL 33076	Address	
	gmakhlouf@deggc.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report notif	ication)
For further information	concerning this matter, please c	all:	
George Makhlouf		954 675-2420 at ()	
Name	of Person	Area Code Daytimo	: Telephone Number
Enclosed is a check for t	the 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:

.

TO:

Registration Section

**Division of Corporations** 

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

FILED

18 OCT 22 PHII: 40

ALLAMARIA

SEC. STATE

GMK CONSTRUCTION SERVICES, 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 Lia	ability Company	were filed on 11/13/20	17	and assigned
Florida document number L17000234310	·			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		
The new name must be distinguishable and contain the wo	ords "Limited Liabil	lity Company," the designat	ion "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applica	ible:			
(Principal office address MUST BE A STREET	(ADDRESS)			
Enter new mailing address, if applicable:			<del>-</del>	
(Mailing address MAY BE A POST OFFICE B	BOX)			
		· · · · · · · · · · · · · · · · · · ·		<del></del>
B. If amending the registered agent and/o	or registered of	Tico address on our	records enter t	he name of the new
registered agent and/or the new registered off			records, enter ti	ie name of the new
Name of New Registered Agent:	George Makhle	ouf		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	5401 NW 102r	nd AVE Suite 120		
The state of the s		Enter Florida stre	et address	
	Sunrise		, Florida <sup>3335</sup>	i1
		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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Start Holding LLC	5401 NW 102ND AVE Suite 120	
		0 : 51 00054	Add
		Sunrise, FL 33351	<b></b>
			Remove
	George Makhlouf	5401 NW 102nd AVE Suite 120	Change
MGR			<b></b> _ <b></b> Add
		Sunrise, FL 33351	
			□ Remove
			Change
			U Add
			Remove
			S S T
			☐ Change
			□ Add ·
			Remove
			Remove
			Change
			□ Remove
			<b>5</b> 0
			Change
		· · · · · · · · · · · · · · · · · · ·	☐ Remove
			☐ Change

. Han	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	-v: 18
	S T
	22 P
	<u> </u>
	<u> </u>
F Fffer	etive date, if other than the date of filing: (optional)
(If an e <u>Note</u>	effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(  1 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	d October 17, 2018.
	Signature of a member or authorized representative of a member
	Signature of a mention of authorized representative of a member
	George Makhlouf

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00