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(Re	equestor's Name)	
(Ad	idress)	
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(Ci	ty/State/Zip/Phone	·#)
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COVER LETTER

TO: Registration Sec Division of Corp	tion orations 		
SUBJECT:4770 G	M Property, LLC		
SUBJECT.	Name of Limit	ted Liability Company	•
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspor	idence concerning this matter t	o the following:	
	Gabriel Sarry		
		Name of Person	
	Firm/Company 21121 NE 24th Court Address Miami, FL 33180 City/State and Zip Code gsarry@gmail.com E-mail address: (to be used for future annual report notification) ormation concerning this matter, please call: Gabriel Sarry Name of Person at (305) 606-6299 Area Code Daytime Telephone Number heck for the following amount: ing Fee \$30.00 Filing Fee & Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section STREET/COURIER ADDRESS: Registration Section		
	- · · - · · · · - · · · · · · · · · · ·		
	21121 NE 24tr		
	Miami, FL 331		
	anne (Mamail	·	
	E-mail address: (I	o be used for future annual repor	t notification)
For further information co	oncerning this matter, please ca	મી:	
Gabriel	Sarry	at (<u>305</u>) 606-	
Name of	Person	Area Code D	aytime Telephone Number
Enclosed is a check for th	e following amount:		
☑ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Divisio	n of Corporations	Division of C Clifton Build	orporations
	ox 6327 assee, FL 32314	2661 Executi	ve Center Circle
		Tallahassee,	FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 Liability Company were filed on	t
Florida document numberL17000251142 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:	Ė
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here:	
A. If amending name, enter the new name of the limited liability company here:	
The new same must be distinguishable and contain the words "Limited Liability Company" the designation "LLC" or the abbreviation "LLC."	
The new maint must be distinguishable and commande words.	
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
	JAN.
Enter new mailing address, if applicable:	1-5 1-5
(Mailing address MAY BE A POST OFFICE BOX)	2
Truting dual ess MAT DIZATOST OF TIEL DOIG	<u> </u>
registered agent and/or the new registered office address here: Name of New Registered Agent:	
New Registered Office Address: 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 w provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documen 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.	ıd
If Changing Registered Agent, Signature of New Registered Agent	-

Page 1 of 3

. ,		
If amendi	ing Authorized Person(s) authorized ed from our records:	of this Manager is Gabriel Sarry, not Address Gartriel Sarry.
MGR =	Manager	of this Manager is
AMBR =	Authorized Member	Gabriel Sarry, not
<u>Title</u>	Name	Address . ction
MGR	Garbriel Sarry	- \frac{211211}{211211}
		Miami, I
		;
MGR	Gabriel Sarry	
		Miami, FL 33180 ☐ Remove
MGR_	Paivi Kontinen Sarry	
		Miami, FL 33180 □ Remove
		Change
		Remove
		Change
		□ Remove
		Change
		Add
		Remove
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ective date, if other than the date o	f filing:		(optional)	
effective date is listed, the date must be spectee: If the date inserted in this block doe	itic and cannot be prior to date	of filing or more than 90 da atutory filing requireme	ays after filing.) Pursuant to 6 nts, this date will not be l	305.0207 (3)(b) isted as the
ument's effective date on the Departme	nt of State's records.	1		
record specifies a delayed effec	live date, but not an e	effective time, at 12	2:01 a.m. on the ear	rlier of:
he 90th day after the record is	filed.			
2	2018			
ed Sanuary Sy	$, \frac{2010}{7}$			
place	span			
Signatu	re of a member or authorized re	epresentative of a member		
	1			
	Gabriel Sa	arn.		

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Filing Fee: \$25.00