

L18000033374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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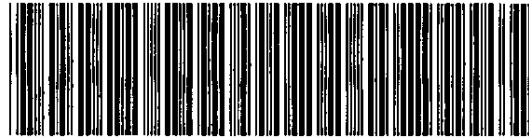
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

S. WARREN

FEB 26 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GFS 14TH AVENUE, 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:

LAWRENCE H. FEDER

Name of Person

FEDER & FEDER, ATTORNEYS AT LAW

Firm/Company

3900 HOLLYWOOD BLVD. SUITE 103

Address

HOLLYWOOD FL 33021

City/State and Zip Code

LHFEDERLAW@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAWRENCE H. FEDER

954 962-5571 EXT 203
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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:
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

Fedex

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GFS 14TH AVENUE, 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 Liability Company were filed on 02/06/2018 and assigned
Florida document number L18000033374.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C/O BRUCE A. FISCHMAN

3140 S OCEAN BLVD. #401 N

PALM BEACH FL 33480

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

C/O BRUCE A. FISCHMAN

3140 S OCEAN BLVD. #401 N

PALM BEACH FL 33480

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:

C/O BRUCE A. FISCHMAN

New Registered Office Address:

3140 S OCEAN BLVD. #401 N

Enter Florida street address

PALM BEACH

City

, Florida

33480

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>	<u>Type of Action</u>
MGR	BRUCE A. FISCHMAN		<input type="checkbox"/> Add
		3140 S OCEAN BLVD.#401N	<input type="checkbox"/> Remove
		PALM BEACH FL 33480	<input checked="" type="checkbox"/> Change
MGR	NEAL A. SIMON		<input type="checkbox"/> Add
		3557 CLUBSIDE CIRCLE	<input type="checkbox"/> Remove
		BOCA RATON FL 33496	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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[illegible]

(If an 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)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated

Feb. 20, 4, 2012

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Lawrence H. Teder, Esq.
Typed or printed name of signer

Typed or printed name of signee

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-10 FEB 26 AM 10:56
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