

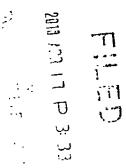
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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COVER LETTER

Div	ision of Corp	porations				
SUBJECT:	G&VSTYL	E LLC				
<i></i>	7-1-3-	Name of Lim	ited Liability Company			
The enclosed	Articles of A	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		JOEL FRIEND				
Name of Person				_		
JOEL FRIEND & ASSOCIATES						
Firm/Company 2863 EXECUTIVE PARK DRIVE SUITE 105				_		
			Address		_	
	WESTON FLORIDA 33331					
		City/State and Zip Code			_	
		JOEL@JOELFRIEND.CO			29 B 153	
		E-mail address: (to be used for future annual rep	ort notification)	. نځ	
For further in	iformation co	ncerning this matter, please co	all:		. ~	i
JOEL FRIE	ΝD		954 704-1 at ()	040	. <u> </u>	. 1
	Name of	Person		Daytime Telephone Numbe		
					الن: الن:-	
Enclosed is a	check for the	e following amount:				
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	d) Certifie	ate of Status &	

MAILING ADDRESS:

TO:

Registration Section

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

. <u></u>			
ny as it now appears on our records.) Liability Company)			
were filed on 03/23/2018	and	d assigned	
ility company here:			
ity Company," the designation "LLC" or the	abbreviatio	n "L.L.C."	
60 SW 13 STREET			
PH 5214			
MIMAI, FLORIDA 33130			
ffice address on our records, <u>ente</u> :	r the na	me of the r	
•	2919 1919		
<u> </u>		:]	
Enter Florida street address			
	IJ	1 1]	
City		ode -	
	ليا لي:		
	ility company here: ity Company," the designation "LLC" or the a 60 SW 13 STREET PH 5214 MIMAL, FLORIDA 33130 Mice address on our records, ente e: Enter Florida street address	ility company here: ity Company." the designation "LLC" or the abbreviation 60 SW 13 STREET PH 5214 MIMAL FLORIDA 33130 Finer Florida street address City Florida City And City City And City And City City City City And City Ci	

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 antending 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	GIOVANNA DE LA CRUZ	201 SE 2ND AVE	Add
		MIAMI, FLORIDA 33131	□ Remove
			Change
MGR	JOSE M PARRA	60 SW 13 STREET PH 5214	■ Add
		MIAMI, FLORIDA 33130	□ Remove
			Change
MGR	PEDRO A VILLALON	60 SW 13 STREET PH 5214	Add
		MIAMI, FLORIDA 33130	☐ Remove
			☐ Change
			Add
			Remove Change
			☐ Change
			Add رب برب Remove
			□ Change
			☐ Remove
			Change

Ifamo	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		_
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		.3 -	
Effect	tive date, if other than the date of filing: (optional)		1 ^- ***
Note:	Tective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pro- If the date inserted in this block does not meet the applicable statutory filing requirements, this date with	not be li المعاددة السرب	sted as i
docun	ment's effective date on the Department of State's records.	. J	
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. one 90th day after the record is filed.		ller of
Dated	Hay 14 2018.		
	Signature of a member or authorized representative of a member		

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Filing Fee: \$25.00