

218000077944

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** GOLD SIM CELLULAR SCIENCE, 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:

PHILIP SHENKMAN

\_\_\_\_\_  
Name of Person

PHILIP SHENKMAN CPA, P.A.

\_\_\_\_\_  
Firm/Company

12946 SW 133 COURT

\_\_\_\_\_  
Address

MIAMI, FL 33186

\_\_\_\_\_  
City/State and Zip Code

PHILIP@SHENKMANCPA.COM

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

For further information concerning this matter, please call:

PHILIP SHENKMAN

305 271-8585 EXT 204  
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

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

GOLD SIM CELLULAR SCIENCE, 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 March 27, 2018 and assigned Florida document number L18000077944.

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 "LLC."

**Enter new principal offices address, if applicable:**

**(Principal office address MUST BE A STREET ADDRESS)**

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

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18 SEP 18 AM 6:59

**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: PHILIP SHENKMAN

New Registered Office Address: 12946 SW 133 COURT  
Enter Florida street address

MIAMI, Florida 33186  
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>	<u>Type of Action</u>
MGR	ASSUREIMMUNE LLC	1011 SUNNY BROOK ROAD, <input checked="" type="checkbox"/>	<input type="checkbox"/> Add
		SUITE 900 <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33136 <input type="checkbox"/>	<input type="checkbox"/> Change
MGR	GOLD SIM BEIJING INTL CO. LTD	EAST BEIBAI NO 127 <input type="checkbox"/>	<input type="checkbox"/> Add
		FANGSHAN DISTRICT <input checked="" type="checkbox"/>	<input type="checkbox"/> Remove
		BE. BEIJING CH <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Change
		<input type="checkbox"/>	<input type="checkbox"/> Add
		<input type="checkbox"/>	<input type="checkbox"/> Remove
		<input type="checkbox"/>	<input type="checkbox"/> Change
		<input type="checkbox"/>	<input type="checkbox"/> Add
		<input type="checkbox"/>	<input type="checkbox"/> Remove
		<input type="checkbox"/>	<input type="checkbox"/> Change
		<input type="checkbox"/>	<input type="checkbox"/> Add
		<input type="checkbox"/>	<input type="checkbox"/> Remove
		<input type="checkbox"/>	<input type="checkbox"/> Change
		<input type="checkbox"/>	<input type="checkbox"/> Add
		<input type="checkbox"/>	<input type="checkbox"/> Remove
		<input type="checkbox"/>	<input type="checkbox"/> Change

18 SEP 18 AM 6:55

10 SEP 18 AM 6:59  
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(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.

x Philip Hubmann  
Signature of a member of

Signature of a member or authorized representative of a member

Typed or printed name of signee