

218000162500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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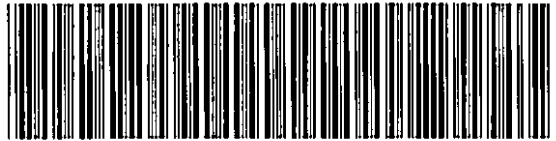
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
AUG 23 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GAD SPIRITS, 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:

Daniel Holtz / Jorge Segrera

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

Walden Capital Corporation, LLC

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

3250 NE First Avenue, Suite 305

\_\_\_\_\_  
Address

Miami, FL. 33137

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

jsegrera@waldencapital.net

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

For further information concerning this matter, please call:

Jorge Segrera

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

305  
at (\_\_\_\_\_)  
Area Code

576-5060

ext 104  
\_\_\_\_\_  
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**

**FILED**  
**18 AUG 15 AM 6:40**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

GAD SPIRITS, 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 July 05, 2018 and assigned  
Florida document number L18000162500.

This amendment is submitted to amend the following:

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

WALDEN MANAGEMENT SERVICES, LLC

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:**

3250 NE First Avenue, Suite 305

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

Miami, Florida

33137

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

3250 NE First Avenue, Suite 305

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

Miami, Florida

33137

**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:

WALDEN CAPITAL CORPORATION

New Registered Office Address:

3250 NE First Avenue, Suite 305

*Enter Florida street address*

Miami

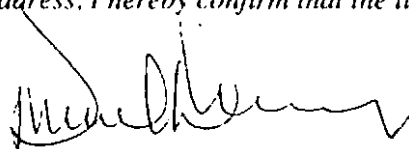
*City*

Florida 33137

*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	Daniel M Holtz	3250 NE First Avenue, Miami, FL 3	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jorge Segrera	3250 NE First Avenue, Miami, FL 3	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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TALLAHASSEE

18 AUG 1951  
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TALLAHASSEE, FLORIDA

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TALLAHASSEE FLORIDA

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated August 06

2018

Signature of a member or authorized representative of a member

DANIEL M. HOLTZ

Typed or printed name of signee