

L18 000 166 314

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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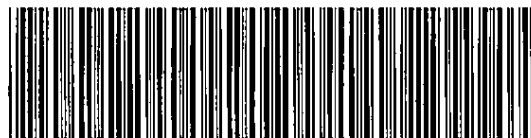
(Business Entity Name)

(Document Number)

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OCT 25 2020

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GIO'S ITALIAN ICE LLC  
Name of Limited Liability Company

DOCUMENT NUMBER: L18000166314

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DENNIS GERMANO  
Name of Person

GIO'S ITALIAN ICE LLC  
Name of Firm/Company

1950 VIERA BLVD  
Address

VIERA FLORIDA 32955  
City/State and Zip Code

gio@giositalianice.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DENNIS GERMANO at ( 321 ) 428-3239  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

Gio's ITALIAN ICE 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 OCTOBER 5, 2019 and assigned Florida document number L18000166314.

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)

**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:

DENNIS GERMANO

New Registered Office Address:

1950 VIERA BLVD STE #101

Enter Florida street address

ROCKLEDGE

City

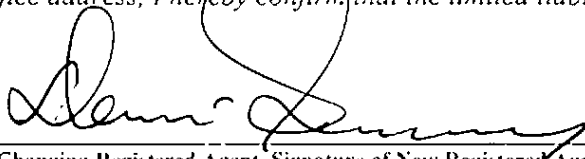
Florida

32955

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>
PRES.	KEITH GERMANO	1246 CLUBHOUSE DRIVE	<input type="checkbox"/> Add
AMBR		ROCKLEDGE, FL 32955	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
	CHRISTOPHER GERMANO	649 WILLIS AVE APT. 1	<input checked="" type="checkbox"/> Add
AMBR		WILLISTON PARK	<input type="checkbox"/> Remove
		NY 11596	<input 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"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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DECEMBER 14  
TALLAHASSEE, FL

2020 SEP 17 PM 6:03  
SECRET  
TALLAHASSEE, FL

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**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 DENNIS GERMANO 8/14/2020

Gene Evans

Signature of a member or authorized representative of a member

DENNIS GERMANO PRESIDENT DMBR  
Typed or printed name of signer