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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ddress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



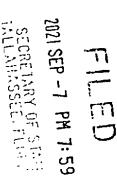


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4/10/2011



COVER LETTER

Division of Corporations
SUBJECT: GABYS PROPERTY TWESTMENT GROUP, 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:
FRANCISCO HERNANDEZ Name of Person Caralle Para Tolomore
GABN'S PROPERTY TAVESTMENT GROUP, LLC
3168 NW 28TH ST Address
Missair Fl 33142 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
FRANCISCO HERNANDER at (305) 519-0574 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \text{S30.00 Filing Fee & Certificate of Status} \Bigcup S55.00 Filing Fee & Certificate of Status & Certificate of S

Mailing Address:

Registration Section

TO:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2021 SEP -7 PM 8: 00

(Name of the Limited Liability Compar (A Florida Limited L	OVE STIMENT CREETARY OF STATE IN as it now appears on our records. lability Company)
The Articles of Organization for this Limited Liability Company Florida document number	were filed on $\frac{O7/16/2Cib}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
AIN	
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3168 NIW 2016
(Principal office address MUST BE A STREET ADDRESS)	MIANT, FL 33142
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3168 NW 28TH ST MIDNI, FL 33142
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
Name of New Registered Agent:	AUCISCO HERNANDEZ
New Registered Office Address: 3168	NIU 28TH 5T Enter Florida street address
	City Florida 33/42 Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete	

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 Age

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>	Name	Address	Type of Action
MGB	YUDAISY B. HERNANDE	LAZZZSW ISZRDCT	□Add
		Missni, FL 33185	Remove
			□Change
			□Add
			□Remove
			□Change
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			□Remove
			□ Change

. If ar	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	<u> </u>
(If an Note	ctive date, if other than the date of filing: AUGUST A TH 2071 (optional)
the rec	ord 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 filed.
Date	od SEPTEMBER (57). 2021.
	Signature of a member or authorized representative of a member
	FRANCISCO HERNANDER Typed or printed name of signee

 $\mathcal{H} = \{ \mathbf{r}_{i}, \mathbf{r}_{i}, \dots, \mathbf{r}_{i} \in \mathcal{L}_{i}, \mathbf{r}_{i} \in \mathcal{L}_{i} \}$

Filing Fee: \$25.00