10/25/2018

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Division of Corporations

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From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011

Phone : (844)386-0178

Fax Number

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GC RECYCLING, LLC				
(Name of the Limi	ted Liability Co. (A Florida Limi	mpany as it now appears on led Liability Company)	our records.)	
The Articles of Organization for this Limited L	liability Compa	any were filed on Augus	n 3, 2018	and assigned
Florida document number L18000187093				2011 110 2
This amendment is submitted to amend the fol				ZUIR OCT 2 SAGRE PAR TALLAR
A. If amending name, enter the new name of	of the limited !	liability company here:		HA 26
N/A				SSC ≥ 11
The new name must be distinguishable and contain the	words "Limited L	iability Company," the desig	nation "LLC" or the	abbrevialion//L.L.C."
Enter new principal offices address, if appli	cable:	N/A	andrekko analik kanin 1844 yan penjabah ka be-s	그런 분
(Principal office address MUST BE A STRE				
Enter new mailing address, if applicable:		N/A		
(Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and registered agent and/or the new registered of			ır records, <u>ente</u>	r the name of the new
Name of New Registered Agent:	N/A			
New Registered Office Address:	N/A			
	************	Enter Florida	street address	
			, Florida_	
	•	City		Zip Code
New Registered Agent's Signature, if changing	Registered Ag	ent:		

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

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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>	Address	Type of Action
MGR	Marco Graniero	3655 N.W. 48th Street Miami, Florida 33142	
			□ Remove
			□ Change
			D Add
		<u> </u>	☐ Remove
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			□ Remove
			□ Change

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N/A				
				
				
				
				
				
				
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Effective date, if other than the d	ate of filing:	-	(optional)	
Note: If the date inserted in this bloc	ck does not meet the applica partment of State's records.	ble statutory filing requ	irements, this date w	ill not be listed as t
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