Florida Department of State

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000238725 3)))



H220002387253ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page	. Doing so
will generate another cover sheet.	

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 1200000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

92

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **GAMOVA LLC**

0
0
04
\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 1 4 2022

к. Brumbley

3052201440

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

GAMOVA LLC				
(Name of the Limite	d Liability Comp A Florida Limited	lany as it now appears on our records.) Liability Company)	<u></u>	
The Articles of Organization for this Limited Lie Florida document number L19000008073		and assigned		
	wing:			
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 "L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: 7369 SHERIDAN ST SUITE 100 HOLLYWOOD/FL 33024				
The new name must be distinguishable and contain the wo	rds "Limited Liabi	ility Company," the designation "LLC" or the al	observation "L.L.C."	
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 "L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) HOLLYWOOD/FL 33024 Enter new mailing address, if applicable: 7369 SHERIDAN ST SUITE 100				
(Mailing address MAY BE A POST OFFICE B	<u>ox</u>)	HOLLYWOOD/ FL 33024		
B. If amending the registered agent and/or regagent and/or the new registered office address Name of New Registered Agent:	gistered office a here:	address on our records, enter the nam	e of the new registered	
	176 000 776 0			
New Registered Office Address:	175 SW 7TH S	T SUITE 1906 Enter Florida street address		
	MIAMI	, Florida 333	130. Page 3000	
	<u> </u>	$C(\eta)$	Zip Code	
New Registered Agent's Signature, if changing Re-	gistered Agent:		ည်	

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.

3052201440

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	HAROLD S MONDRAGON	7369 SHERIDAN ST SUITE 100	
		HOLLYWOOD / FL 33024	□Remove
			[]Change
			□ Add
			[]Remove
			□ Change
			□Add
			П Петоче
			OChange
			□Add
			ElRemove
			Change
			[]Add
			□ Remove
			Cl Change
			□ Add
			Change

	·						
							-
						-	-
_			 <u>-</u>		-		_
				·			
							-
			·			··	-
		·····	<u> </u>		·		
							
			·····				•
							
_							
_		·	 				
							
							
							
						-	
Effective fan effect <u>Note:</u> If	e date, if other than tive date is listed, the date the date inserted in that t's effective date on the	the date of filin must be specific and is block does not a	g:d cannot be prior to meet the applicab	date of filing or more the	(option on 90 days after for uirements, this	niil) iling.) Pursunnt to 605. date will not be liste	0207 :d as
JULUILEII	t's effective date on th	ie Department of S	State's records.				
			t an effective time	:. at 12:01 a.m. on the	e earlier of: (b)	The 90th day after	the
	specifies a delayed effe	ective date, but not	an oncourt time	,	• /	•	
e record s od is filed	specifies a delayed effe	ective date, but no	2022	,	• • • • • • • • • • • • • • • • • • • •	·	
e record s rd is filed	•	cerive date, but no		-	, ,	·	
e record s od is filed	•	2001	2022	ed representative of a n			

Filing Fee: \$25.00