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	Registration Se Division of Cor				
SUBJEC	GT Genera	l Contractors LLC			
	Name of Limited Liability Company				
		Amendment and fee(s) are sub	_		
Please re	tum all correspo	ondence concerning this matter	to the following:		
		Antonio Assenza			
					
		GT Geneal Contractors LI	C		
		Firm/Company			
		6460 NW 72 Way			
		· '' '' · · · · · · · · · · · · · · · ·			
		Parkland, FL 33067			30 8
		aassenza@globetecconstruc	City/State and Zip Code		
		_	to be used for future annual report notif	fication)	100 Ca
For furth	er information c	oncerning this matter, please c	all:		<u>៍</u> ័ ញ់
Antonio	Assenza		954 225-3391 at()		
	Name o	f Person		e Telephone Number	
•		L CH :			
		he following amount:			
■ \$25.0	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 Stat Certified Copy (additional copy is end	
	MAII	INC ADDRESS:	STDFFT/COUDI	ED ADDDECC.	

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 ORGANIZATION OF

GT General Contractors LLC					
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records.) nited Liability Company)				
The Articles of Organization for this Limited Liability Company were filed on January 8 2019 and assigned Florida document number L19000009534					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	l liability company here:				
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the ab	breviation "L.L.C."			
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·			
(Principal office address MUST BE A STREET ADDRES	(S)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
B. If amending the registered agent and/or registered egistered agent and/or the new registered office address		the name of the new			
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address	7. m			
	, Florida	 			
	City	Zip Code			

Registered Agent's Signature, if changing Registered Agent:

reby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the isions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and of the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability any has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager AMBR = Authorized Member

<u>i itie</u>	Name	Address	Type of Action
MGR	Assenza, Antonio J		
		6460 NW 72 Way Parkland, FL 33067	Remove
			Change
MGR	Gatume, Danilo		
		6460 NW 72 Way Parkland, FL 33067	■ Remove
			Change
MGR	Globetec Construction LLC	6460 NW 72 Way Parkland, FL 33067	■ Add
			Remove
			□ Change
GR	Tiger & Tiger Group LLC	6460 NW 72 Way Parkland, FL 33067	□ Change
			□ Remove
			□ Changë
			☐ Remove
			□ Change
-			
			□ Remove

			
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ffective date, if other than the	January 28 2019 date of filing:	(optional)	
an effective date is listed, the date mu	st be specific and cannot be prior to dat	e of filing or more than 90 days after filing.) Pursuant to 605.020	:07 (3)(b
ocument's effective date on this becoment's		statutory filing requirements, this date will not be listed a	as the
Rument 3 effective date on the L	epartment of State's records.		
e record specifies a delaye The 90th day after the rec	I effective date, but not an	effective time, at 12:01 a.m. on the earlier	of:
The John day after the rec	ora is filed.		
January 26	2019		
ated	·		
	1		
	Signature of a member of authorized	representative of a member	
	The state of the s		
Antonio J Assenza			
	Typed or printed nam	ne of signee	

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Filing Fee: \$25.00