

L190000009534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

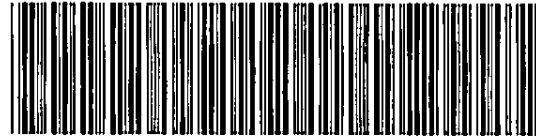
(Business Entity Name)

(Document Number)

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APR 08 2019

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19 APR -3 PM 5:08
TALLAHASSEE, FLORIDA

APR 13 2019

S. YOUNG

**TO: Registration Section
Division of Corporations**

SUBJECT: GT General Contractors 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:

Antonio Assenza

Name of Person

GT General Contractors LLC

Firm/Company

6460 NW 72nd Way

Address

Parkland, FL 33067

City/State and Zip Code

aassenza@gt-general.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Antonio Assenza

954 225-3391

at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|--|--|

MAILING ADDRESS:
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

(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 January 8, 2019 and assigned
Florida document number 1.19000009534.

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.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

10191 West Sample Road

Suite# 103

Coral Springs, FL 33065

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	GlobeTec Construction LLC		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Antonio Jose Assenza	10191 West Sample Road	<input checked="" type="checkbox"/> Add
		Suite# 103	<input type="checkbox"/> Remove
		Coral Springs, FL 33065	<input type="checkbox"/> Change
MGR	Antonio Jose Assenza	10191 West Sample Road	<input checked="" type="checkbox"/> Add
		Suite# 103	<input type="checkbox"/> Remove
		Coral Springs, FL 33065	<input type="checkbox"/> Change
AMBR	Tiger & Tiger Group LLC		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Jose Danilo Guatume	10191 West Sample Road	<input checked="" type="checkbox"/> Add
		Suite# 106	<input type="checkbox"/> Remove
		Coral Springs, FL 33065	<input type="checkbox"/> Change
MGR	Jose Danilo Guatume	10191 West Sample Road	<input checked="" type="checkbox"/> Add
		Suite# 106	<input type="checkbox"/> Remove
		Coral Springs, FL 33065	<input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.