## 1190000 23335

(Requestor's Name)
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FEB 15 2019 S. YOUNG

## **COVER LETTER**

TO:	Registration of	Corporations				
SUBJE	ect.	G 450	H (	GROUP	LLC	
SUBJE	.cr:	N	ame of Lim	ited Liability Company		<del></del>
The en	closed Article	es of Amendment and fee	(s) are sub	mitted for filing.		
Please	return all cor	respondence concerning t	his matter	to the following:		
				Name of Person		
		<del></del>	<del> </del>	Firm/Company		<del></del>
		<del></del>		Address	<del></del>	<del></del>
		<del></del>		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·	
		E-ma	il address: (	to be used for future annual r	eport notification)	<del></del>
For fur	ther informat	ion concerning this matte	r, please c	all:		
	N	ame of Person		at () Area Code	Daytime Telepho	one Number
Enclose	ed is a check	for the following amount	:			
<b>र्च</b> \$2:	5,00 Filing F	ce \$30.00 Filing Certificate o		□ \$55.00 Filing Fee & Certified Copy (additional copy is encl		\$60,00 Filing Fec. Certificate of Status & Certified Copy (additional copy is enclosed)
						,,
	/	IAILING ADDRESS: egistration Section	1		COURIER ADI  ion Section	ORESS:
	/ D	ivision of Corporations O. Box 6327	! 1	Division o Clifton B	of Corporations— uilding	
		allahassee, FL 32314		2661 Exe	ecutive Center Cin see, FL 32301	cle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our records.) bility Company)
The Articles of Organization for this Limited Liability Company we Florida document number	ere filed on JANMARY LL, 3019 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ty company here:
GUSCH GROUP LLC	
The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable:	313 DATURA ST, STERMEN STE,
(Principal office address MUST BE A STREET ADDRESS)	WEST PACM BEACH PC
	33401
Enter new mailing address, if applicable:	3300 SOUTH PIXIE
(Mailing address MAY BE A POST OFFICE BOX)	HILHWAY STE, 1-277
	WEST PARM 13EATH PZ 33405
B. If amending the registered agent and/or registered office registered agent and/or the new registered office address here:	e address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	5 2
New Registered Office Address.	Enter Florida street address
<del></del>	City Florida Zip Code .
New Registered Agent's Signature, if changing Registered Agent:	City Zip Code .
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete pe accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office ad	erformance of my duties, and I am familiar with and ovided for in Chapter 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Actio
MGR	Jacob Ogletrec	3300 SOUTH DIXIE	🗆 Add
		HWY, STE 1-277	Remove
		WEST PATM BEACH, FC	□ Change
		33405	🗆 Add
			Remove
<del></del>			□ Change
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			🗆 Remove
			Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
,	
E. Effec	tive date, if other than the date of filing:(optional)
(If an ei Note:	tive date, if other than the date of filing:
If the re (b) The	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	02,07 2019
	Signature of a member or authorized representative of a member
	Typed or printed name of signee Typed

Page 3 of 3

Filing Fee: \$25.00