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COVER LETTER

TO: Registration S Division of Co			
THE TAX SUBJECT:	MECHANIC LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	ROBERT F. REESE III		
		Name of Person	
		Firm/Company	
	110 Ridgecrest Dr.		
		Address	
	EUSTIS, FL 32726		
		City/State and Zip Code	
	R.REESE3@PROTONMA		
For further information	r-mail address:	to be used for future annual report no	tification)
ROBERT F. REESE III		407 341-1402	
Name o	of Person	at () Area Code Daytii	me Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 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 Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addre</u> Registration		Street Address: Registration So	ection
Division of C		Division of Co	
P.O. Box 632		The Centre of	Tallahassee
Tallahassee,	FL 32314	2415 N. Monro	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as (A Florida Limited Liabili	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited Liability Company were	filed on JUNE 25, 2019	and assigned
Florida document number L19000166191		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability of	company here:	
GELTWISE VENTURES LLC		
The new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		202
		<u> </u>
Enter new mailing address, if applicable:		بر . سینسی - سان
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
Truming waters MAT BE ATOM OF TICE BOA		-
		<u> </u>
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	ess on our records, <u>enter the r</u>	name of the new register
Name of New Registered Agent:	.2.02	
New Registered Office Address:		
	Enter Florida street address	
	. Florida	l
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
l hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete perfo		

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

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>	Name	Address	Type of Action
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			□ Rеточе
			□ Add
			Remove
			☐ Change
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(If an eff	ive date, if other than the date of filing: (optional) ective 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 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ment's effective date on the Department of State's records.
he recor	d 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 led.
Dated	JUNE 11, 2020 12:00 PM
	JUNE 11, 2020 12:00 PM
	Note of Run
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00