119000222643

(Requestor's Name)
(Address)
(133.335)
(Address)
(City/State/Zip/Phone #)
,,
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Nume)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





400368246014

06/21/21--01036--012 **25.00

-diala 7

COVER LETTER

TO:

	Registration Se Division of Cor			
OLUB LE CO	G.OCEANS			
SUBJEC	Г:	Name of Lim	ited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please reti	urn all correspo	ndence concerning this matter	to the following:	
		GABRIELLE ZAKE SIMA	AO SAMPAIO	
			Name of Person	
			Firm/Company	
		8100 LAKE SERENE DR		
			Address	
		ORLANDO FL 32836		
			City/State and Zip Code	
		JULIANAMGAVIAO@HC	DIMAIL.COM to be used for future annual report noti	tication)
For furthe	r information c	oncerning this matter, please c		
JULIANA	A KARFITSAS		321 3214365110 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed i	is a check for th	ne following amount:		
\$ 25.0	0 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)
	Mailing Addres		<u>Street Address:</u> Registration Se	ction
Registration Section Division of Corporations			Division of Cor	
	P.O. Box 632		The Centre of T	Tallahassee
Ί	fallahassee, I	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G.OCEANS LLC				
(Name of the Limited L (A f	iability Company as Iorida Limited Liabil	it now appears on ity Company)	our records.)	
The Articles of Organization for this Limited Liabil	ity Company were	e filed on 09/03/2	019	and assigned
Florida document number 1.19000222643	·			
This amendment is submitted to amend the followin	ument number L19000222643 Iment is submitted to amend the following: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited liability company," the designation "LLC" or the abbreviation "LLC." Inding address address, if applicable: Indice address MUST BE A STREET ADDRESS) SAME SAME SAME Indice address MAY BE A POST OFFICE BOX) Inding the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered agent and/or registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records, enter the name of the new registered office address on our records.			
A. If amending name, enter the new name of the	Intent is submitted to amend the following: Inding name, enter the new name of the limited liability company here: Inding name, enter the new name of the limited Liability Company," the designation "LLC" or the abbreviation "LLC." Inding name, enter the new name of the limited Liability Company, the designation "LLC" or the abbreviation "LLC." Inding address, if applicable: Inding address MUST BE A STREET ADDRESS) SAME Inding address, if applicable: Inding address, if applicable: Inding the registered agent and/or registered office address on our records, enter the name of the new registered of the new registered office address here: Inding the Registered Agent: SAME			
SAME				
The new name must be distinguishable and contain the words	"Limited Liability C	ompany," the design	ation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable	:: 			
Principal office address MUST BE A STREET A.	DDRESS) SA	ME		
Enter new mailing address, if applicable:	$\frac{SA}{}$	\МЕ 		
Mailing address MAY BE A POST OFFICE BOX	<u>v)</u>			
	_			
D. If amonding the registered agent and/or regis	tornd office addr	APP AR ATT BAAAF	de onter the name	o of the new register
b. It amending the registered agent and/or regis agent and/or the new registered office address be		ess on our recor	us, enter the name	e of the new register
Name of New Registered Agent: S	AME			<u></u>
New Registered Office Address:				
		Enter Florida s	treet address	
_			Florida	·-
		City		Zip Code

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.

New Registered Agent's Signature, if changing 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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	GUSTAVO G GAROFALO	8100 LAKE SERENE DR	□Add
		ORLANDO FL 32836	Remove
			□Change
AMBR	MAURO ZACCARIAS GAROFALO	715 CANOPY OAKS COURT	Add
		WINTER GARDEN FL 34787	□Remove
			☐ Change
			□Add
			□Remove
			□Change
			🗖 Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

REM	OVE GUSTAVO AND A	DD MAUR	()					
					· · ·			_
		<u></u>		,		<u> </u>		_
	<u></u>			<u></u>				
						·		
	,			· · · · · · · · · · · · · · · · · · ·				
	<u>.</u>							_
-								_
								_
	·			 				
								_
								_
								_
								
						<u> </u>		_
								_
	luan ist uahumahum aho si					(antion	.1\	
<u>te:</u> If th	late, if other than the declate is listed, the date must be date inserted in this blocks effective date on the Dep	k does not n	neet the appl	icable statutor	ng or more than 'y filing require	00 days after filements, this d	ing.) Pursuant to 6 ate will not be 1	505.020 isted as
cord spo	ecifies a delayed effective	late, but not	an effective	time, at 12:01	a.m. on the ea	arlier of: (b)	The 90th day a	fter the
ed	E 18	,	. 2021					
			F7	\mathcal{M}				
			4	/				
	<u></u>	gnature of a r	member or afit	horized represe	ntative of a men	nber		