# 119000225349

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Certified Copies	Certificates	of Status
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Office Use Only



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#### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 23, 2023

GION LEONE PO BOX 1464 OCALA, FL 34478

SUBJECT: GK SOLUTIONS OF FLORIDA LLC

Ref. Number: L19000225349



We have received your document for GK SOLUTIONS OF FLORIDA LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 223A00024544

Octavia L Simmons Supervisor

www.sunbiz.org

## **COVER LETTER**

10:	Division of Cor			
		TIONS OF FLORIDA, LLC		
SUBJEC	CT:	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		GION LEONE		
			Name of Person	
		GK SOLUTIONS OF FLO	PRIDA, LLC	
		<del></del>	Firm/Company	
		PO BOX 1464		
			Address	
		OCALA, FL 34478		
		<del></del>	City/State and Zip Code	
		G.LEONE@THEGKSOLU		
T., C	har information o	e-mail address: (	to be used for future annual report notif	(Cation)
		concerning this matter, picase c		
GION L			352 566-4016 at ()	
	Name o	of Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for t	he following amount:		
<b>■</b> \$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)
	Mailing Address Registration		<u>Street Address:</u> Registration Se	ction
	Division of C	Corporations	Division of Cor	porations
	P.O. Box 632	27	The Centre of T	allahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GK SOLUTIONS OF FLORIDA, 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 9/16/2019 and assigned Florida document number L19000225349 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." 4216 SE 5TH STREET Enter new principal offices address, if applicable: OCALA, FL 34471 (Principal office address MUST BE A STREET ADDRESS) PO BOX 1464 Enter new mailing address, if applicable: OCALA, FL 34478 (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: 4216 SE 5TH STREET New Registered Office Address: Enter Florida street address

#### 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.

City

**OCALA** 

\_, Florida 34471
Zip Code

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

Title	<u>Name</u>	Address	Type of Action
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			□Remove
			□Change
			□Add
			□Remove
		<del></del>	□ Change
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ecifies a delayed e	ffective date.	but not an e	effective tir	me, at 12:0	)1 a.m. on t	the earlier	of: (b) T	The 90th da	ay after the
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