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JUN 24 2021

COVER LETTER

TO:

TO: Registration Se Division of Con			
GSD FLEE	ET, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	DAN P. HELLER		
	<u> </u>	Name of Person	
	HELLER ESPENKOTTE	R, PLLC	
		Firm/Company	
	2701 PONCE DE LEON I	BOULEVARD, SUITE 301	
	-	Address	· · · · · · · · · · · · · · · · · · ·
	CORAL GABLES, FLOR	IDA 33134	
		City/State and Zip Code	
	Dan@hellerlawgroup.com		
For further information c	E-mail address: (oncerning this matter, please c	to be used for future annual report not all:	ification)
DAN P. HELLER		305 777-3765	
Name o	f Person		ne Telephone Number
Enclosed is a check for the	ne following amount:		
S25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration Sc	ection
Division of C	orporations	Division of Co	rporations
P.O. Box 632 Tallahassee, I		The Centre of 1 2415 N. Monro	Fallahassee oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GSD FLEET, LLC	2 <u>62</u> 1 t	IAY 21 AN 6:53	
(Name of the Limited Liability (A Florida	Company as it now appears o Limited Liability Company) 3	n our records.)	
The Articles of Organization for this Limited Liability Co Florida document number		- 1	and assigned
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company here	:	
he new name must be distinguishable and contain the words "Limit	ed Liability Company," the desig	nation "LLC" or the abbi	eviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRE	ESS)		
		-	
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
"			
			
3. If amending the registered agent and/or registered	office address on our reco	rds, <u>enter the name</u>	of the new registe
gent and/or the new registered office address here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida .	street address	·
		. Florida	
	City	, F 101 lua	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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address FATHAY 21 AN 6:53	Type of Action
MGR	AARON M. SCHAMBACK	8 BAMBOO LANE	
		JUPITER, FLORIDA 33458	≡ Remove
			□Change
MGR	LINDSAY SCHAMBACK	8 BAMBOO LANE	= Add
		JUPITER, FLORIDA 33458	□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
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 _			□Add
			□ Remove
			□Change

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Effective date, if other than the date of filing: If an effective date is listed, the date must be specific and cannot be prior to date of filing. Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	(optional) ng or more than 90 days after filing.) Pursuant to 605.0207 (3 ry filing requirements, this date will not be listed as th
ne record specifies a delayed effective date, but not an effective time, at 12:0 ord is filed.	I a.m. on the earlier of: (b) The 90th day after the
Dated MAY 14 2021	
Signature of a member of authorized represe	