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AUG 22 2020 S. YOUNG



Andre J. Patrone, Esq.*
Kenneth E. Kemp, II, Esq., LL.M
ELIZABETH C. BENTLEY, Esq.
T. Brandon Mace, Esq.

* Admitted in Florida and Illinois

July 7, 2020

Via Certified Mail No. 9314 8699 0430 0072 9291 66

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re:

GC&P CLAIMS, LLC

Dear Sir or Madam:

Enclosed please find an Articles of Amendment to Articles of Organization of GC&P CLAIMS, LLC, changing Glenn C. Pannebakker, a current Authorized Member, to Glenn C. Pannebakker, Trustee of the Glenn C. Pannebakker Trust, as an Authorized Member, and adding Vicki L. Pannebakker, Trustee of the Vicki L. Pannebakker Trust, as an Authorized Member. We have also added Vicki L. Pannebakker as a Manager as well.

Also enclosed please find a check in the amount of \$25.00 representing the filing fee.

If you have any questions or require any additional information, please feel free to contact our office. Regards.

Very truly yours,

PATRONE, KEMP & BENTLEY, P.A.

Kenneth E. Kemp, II

(Signed in his absence to avoid delay.)

KEK/md enclosures

cc: Mr. and Mrs. Glenn C. Pannebakker (without enclosures)

1 12661 New Brittany Blvd. Fort Myers, FL 33907

COVER LETTER

TO:

			COVERE	EITEK	
то:	Registration Sec Division of Corp	tion			
CHDD	GC&P CLAI	MS, LLC			
SUBJ	ECI:	Name of Lim	nited Liability Cor	npany	
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing		
Please	return all correspond	dence concerning this matter	to the following	;;	
		Glen C. Panne	bakker		
			Name of P	erson	
		GC&P CLAIMS, LLC			
			Firm/Con	pany	
		3905 NW 33rd	Place		
			Addres	S	
		Cape Coral Flori	da 339	93 Vin Code	
		emailalen@com			otification)
For fur	ther information cor	scerning this matter, please ea			
(ilen C. Pan	nebakker Person	at (- 2.1	5, 4110	- 5885
-	Name of F	Person	Area (Code Dayt	me Telephone Number
Enclos	ed is a check for the	following amount:			
₫ S2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Fi Certified (additional	_	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address: Registration Se Division of Cor P.O. Box 6327 Tallahassee, FL	porations		Street Address: Registration S Division of Co The Centre of 2415 N. Mont Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GC&P CLAIMS LLC

3

(Name of the Limited Links) of			(22)	,
(Name of the Limited Liability Con	npany as it now appe	ars on our records.)		• \
(Name of the Limited Liability Con (A Florida Limite	ed Liability Company		\- <u>-</u> =	
		1	. 6	•
he Articles of Organization for this Limited Liability Compa	my were filed on _	06/10/202	and assi	gned.
lorida document number <u>L 20000160241</u> .		•	1. The 1. The 1.	•
			÷.	
his amendment is submitted to amend the following:			F: 04	•
16				
a. If amending name, enter the new name of the limited li	ability company l	<u>iere</u> :		
he new name must be distinguishable and contain the words "Limited Lia	ability Company " the	designation "LLC" o	ertha abhaniai - ut t	<u> </u>
	aomy company, me	designation LLC 0	or the appreviation "L.L	C.
Inter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADDRESS)	-		-	
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Inter new mailing address, if applicable:				
address, if applicable.		 		
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Mailing address MAY BE A POST OFFICE BOX)				
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3. If amending the registered agent and/or registered office gent and/or the new registered office address here: Name of New Registered Agent:				
		records, enter th	e name of the new	
3. If amending the registered agent and/or registered office gent and/or the new registered office address here: Name of New Registered Agent:		records, <u>enter th</u>	e name of the new	

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 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 Glen C. Pannebakker, TTEE	Address	Type of Action
AMBR	of the Glen C. Pannebakker Trust ulalo April 14, 2020	3905 NW 3310 Place	🗆 Add
		Cape Coral, Flonda 33993	□Remove
	Vicki L. Pannebakker, 1766 ofthe Vicki L. Pannebakker		MChange
AMBIR	7MBR Trust u/A/D April 14, 2020 3905 Ni	3905 NW 33rd Place	īd Add
		Cape Coral, Florida 33993	□ Remove
			Change
MGR	Vicki L. Panijebakker	3905 NW 330 Place	🗹 Add
	(apa	(ape coral Florida 33993	□Remove
			□Change
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			□Remove
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_	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe	ve date, if other than the date of filing:
he record ord is file	I 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 ed.
Dated_	July 2 . 2020
	Charlings of a manufacture of a manufacture of
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00