L2000020696H

| (Requestor's Name) | |
|-----------------------------------------|---------------|
| (Address) | 900355580 |
| (Address) | 00000000 |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | 11/30/2001018 |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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Office Use Only



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Registration Section

TO:

| Division of | Corporations | • | |
|-----------------------------------|----------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| GBS M | anagement LLC | | |
| SUBJECT: | Name of Lim | ited Liability Company | |
| | | | |
| The enclosed Articles | s of Amendment and fee(s) are sub | omitted for filing. | |
| Please return all corre | espondence concerning this matter | to the following: | |
| | Nickette Merone | | |
| | | Name of Person | |
| | GBS MANAGEMENT LI | LC | |
| | | Firm/Company | |
| | 1020 NW 80TH AVE AP | Г. 106 | |
| | | Address | , |
| | MARGATE, FL 33063 | | |
| | | City/State and Zip Code | |
| | nickette77@hotmail.com | to be used for future annual report no | otification) |
| For further information | on concerning this matter, please c | • | |
| NICKETTE MERON | NE | 561 577-1279 | |
| Nan | ne of Person | at () Area Code Dayt | ime Telephone Number |
| Enclosed is a check fo | or the 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) |
| Mailing 4.3- | lwae | Daming 4 32 | |
| <u>Mailing Add</u> Registratio | | Street Address: Registration S | Section |
| | f Corporations | Division of C | orporations |
| P.O. Box 6 | | The Centre of | |
| Tallahasse | e, FL 32314 | 2415 N. Moni | roe Street, Suite 810 |

Tallahassee, FL 32303

January 14, 2021

NICKETTE MERONE 1020 NW 80TH AVE APT. 106 MARGATE, FL 33063

SUBJECT: GBS MANAGEMENT LLC

Ref. Number: L20000206964

We have received your document for GBS MANAGEMENT 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

The document is illegible and not acceptable for imaging.

Please complete/submit the form in its entirety as there are pages missing.

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) 245-6050.

Letter Number: 721A00000975

Irene Albritton Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Umit | ed Liability Company as it os A Florida Limited Liability C | ym automats on our records.) ompany) | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------|------------------------------------------------------------------------|
| The Articles of Organization for this Limited Li Florida document number 1,20000206964 | ability Company were file | rd on <u>07/16/2020</u> | and assigned |
| This amendment is submitted to amend the folk | owing. | | |
| A. If amending r . enter the new name of | the limited liability con | ipany here: | |
| The new name must be distinguishable and contain the w | rords "Limited Liability Compo | any," the designation "LLC" or th | e abbreviation "L.L.C." |
| Enter new principal offices address, if applic | shle: | | |
| (Principal office address MUST BE A STREE | T ADDRESS) | | |
| | | | |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE & POST OFFICE | BON) | | |
| B. If amending the registered agent and/or agent and/or the new registered office addresses and or New Registered Agent: | | an our records, <u>enter the s</u> | name of the new rezistered |
| New Registered Office Address: | 2234 NORTH FEDERA | AL HWY | |
| TAN INSTITUTE OF THE PARTY | | Enter Florida street address | |
| | BOCA RATON | , Florida | 33431 |
| | Cin | | 7ip Code |
| New Registered Agent's Signature, if changing | Registered Agent: | | |
| I hereby accept the appointment as register provisions of all statutes relative to the pro- accept the obligations of my position as reg- being filed to merely reflect a change in the company has been neutiled in writing of this | per and complete perfori istered agent as provide registered office addres change. | mance of my duties, and L d for in Chapter 605, F.S | om familiar with and Or, if this document is e limited liability |

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

٠..

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
|--------------|-----------------|------------------------------------------|----------------|
| MGR | NICKETTE MERONE | 1020 NW 80TH AVE APT. 106 MARGATE, FL 33 | 8063 ■Add |
| | | | |
| | | | DChange |
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| E. Effective date, if other than the date of filing: (If so effective date is listed, the date must be specific and cannot be prive to date of filing or more than 90 days after filing.) Pursuant to 605 Note: If the date inserted in this block does not need the applicable statutory filing requirements, this date will not be liste document's effective date on the Department of State's records |
| If the record specifies a delayed effective date, but not an effective time, at 12,01 a.m. on the earlier of: (b). The 90th day after record is filled. |
| Dated 02/16 2021 |
| M (A A |
| Substance of a therebot or methorized representative of a member |