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Special Instructions to	Filing Officer:	<u>-</u>
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Office Use Only



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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJEC	~~~	ing Group, LLC		
SUBJEC	-1· <u> </u>	Name of Lim	ited Liability Company	
The encl	iosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Devin Buoniello		
			Name of Person	<del></del>
		GCB Building Group, LLC		
			Firm/Company	
		8500 Legend Club Drive	Name of Limited Liability Company  at and fee(s) are submitted for filing.  cerning this matter to the following:  Suoniello  Name of Person  ailding Group, LLC  Firm/Company  gend Club Drive  Address  Address  Im Beach, FL 33412  City/State and Zip Code quadrel@gmail.com  E-mail address: (to be used for future annual report notification)  nis matter, please call:  at (	
			Address	
		West Palm Beach, FL 334	12	
			City/State and Zip Code	<del></del>
		christinequadrel@gmail.cor		eation
For furth	ner information c		·	auon
		oncerning this matter, please ea		
Jennifer				
	Name o	f Person	Area Code Daytime T	Telephone Number
Enclosed	is a check for th	ne following amount:		
<b>■</b> \$25.	.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Mailing Addres Registration S		Street Address: Registration Secti	ion

Division of Corporations

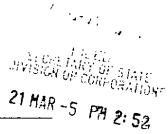
TO:

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**



GCB Building Group, 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 L	iability Company were filed on 10	/26/2020 and assigned
Florida document number L20000338868	*	
This amendment is submitted to amend the following	owing:	•
A. If amending name, enter the new name o	f the limited liability company be	ere:
The new name must be distinguishable and contain the w	ords "Limited Liability Company," the c	lesignation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	
	<del></del>	
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office address on our r s <u>s here</u> :	ecords, enter the name of the new registered
Name of New Registered Agent:	Jennifer Dale	
New Registered Office Address:	4523 Cadiz Circle	
	Enter Flor	rida street address
	Palm Beach Gardens	, Florida 33418
	City	Zip Code

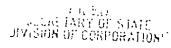
#### New Registered Agent's Signature, if changing Registered Agent:

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.

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



\_\_\_\_\_ Change

21 MAR -5 PA 2: 52 Type of Action Title Name **Address AMBR** Christine Buoniello 8500 Legend Club Drive West Palm Beach, FL 33412 \_\_\_\_\_ 🔳 📆 Remove \_\_\_\_ □Change Caitlin Grippo AMBR **42 SOMERSET DRIVE** \_\_\_\_ □Add HOLBROOK, NY 11741 AMBR Jennifer Dale 4523 Cadiz Circle **≣**Add Palm Beach Gardens, FL 33418 \_\_\_\_\_ □Remove \_\_\_\_\_ Change \_\_\_\_\_ □ Add \_\_\_\_\_ 🗀 Add

Effective date, if other than the date of filing:  (optional)  Effective date, if other than the date of filing:  (optional)  (In a effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 020 Monte; if the date inserted in this block does not need the applicable statutory filing requirements, this date will not be listed adocument's effective date on the Department of State's records.  The energy of the 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 right of the specifies and delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the right of the specifies and delayed effective date. The specifies a delayed effective date is filed.  Signapafe of a member of authorized representative of a member		DIVISION OF CORPORATION
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Filing Fee: \$25.00