Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MILBERY & KESSELMAN CPAS, LLC

Account Number : I20180000053 Phone : (954)583-3223 Fax Number : (954)583-3259

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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tmall.	MUULTESS:			

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Corporate Filing Menu

Help

From: 9545833259

COVER LETTER

TO: Registration Se Division of Cor			
OILER AND COMM	SULTING, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub ondence concerning this matter	·	
	GRANT D. SIEGEL		
		Name of Person	
	GDS CONSULTING, LL		
	Firm/Company		
	3988 SW 141 AVE		
		Address	
	DAVIE, FL 33330		
	GRANTSIEGEL@ICLOU	City/State and Zip Code D.COM	
	_	to be used for future annual report not	ification)
For further information of	concerning this matter, please c	all:	
GRANT D. SIEGEL		954 881-8421	
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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)
	INC ADDRESS	CTUTTT(COLU)	ICD ADDDCCC.

MAILING ADDRESS:

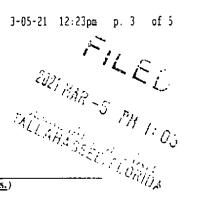
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

To: FAX SERVICE

From: 9545833259

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



GDS CONSULTING, LLC		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
(Name of the Limited Liability (A Florida	y Company as it now appears on our records.) Limited Liability Company)	- Callos
The Articles of Organization for this Limited Liability Co	ompany were filed on 12/16/2020	and assigned
Florida document number L20000389087		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
GDS PUBLIC ADJUSTERS, LLC		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Manager of the Control	
(Principal office address MUST BE A STREET ADDR.	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist		enter the name of the ne
registered agent and/or the new registered office addr	ress here:	
Name of New Registered Agent:		
New Registered Office Address:		
New Negistered Office Address.	Enter Fiorida street address	
	, Flor	ida
	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.

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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 = A	Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			→ □ Change
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			Change Remove
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ffective date, if other than the can effective date is listed, the date must	late of filing:	(op ate of filing or more than 90 days af	tional) ter filing.) Pursuant to 605.020
lote: If the date inserted in this blo ocument's effective date on the De	ck does not meet the applicable	statutory filing requirements, t	his date will not be listed a
e record specifies a delayed The 90th day after the reco	effective date, but not ar rd is filed.	n effective time, at 12:01	. a.m. on the earlier o
MARCH 05	2021		
Grand	Fignature of a member or authorize	d and a second s	

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Filing Fee: \$25.00