## LZ1000013938

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	<del></del>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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DIVISION OF CORPORAL ON

APR 0 8 2021 R. HUNT

## **COVER LETTER**

Registration Section Division of Corporations

TO:

GSR&M			٠.
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of a	Amendment and fee(s) are subt	nitted for filing.	
Please return all correspo	ndence concerning this matter t	o the following:	
	Thomas Minerve		
		Name of Person	
	GSR&M		
		Firm/Company	
	8145 NW 125th LN		
		Address	
	Parkland FL. 33076		
		City/State and Zip Code	
	pidrobert@aol.com		<del></del>
	E-mail address: (	to be used for future annual report noti	fication)
For further information c	oncerning this matter, please ca	all:	
Thomas Minerve		954 70 <b>x</b> 6976	
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for th	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 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	ss:	Street Address:	
Registration :		Registration Se	
Division of C		Division of Cor	
P.O. Box 632		The Centre of 7	raffanassee oe Street, Suite 810
Tallahassee.	丘瓜 ささき1分	2910 IN, MUNIC	to officer parte or o

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GSR&M		
( <u>Name of the Limited Liability Com</u> (A Florida Limite	ipany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compa Torida document number 1.21000013938	ny were filed on January, 04, 2021	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
the new name must be distinguishable and contain the words "Limited Lie	ability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		2821
Principal office address MUST BE A STREET ADDRESS)		Sion of the second seco
Enter new mailing address, if applicable:		2 PH 12
Mailing address MAY BE A POST OFFICE BOX)		<u>0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </u>
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	ce address on our records, enter the	name of the new regist
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	Enter Florida street address	
	, Florid:	a

New Registered Agent's Signature, it 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

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>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Robert Thomas	8145 Nw 125th LN	
		Parkland FL.33076	□Remove
			☐ Change
			□Remove
		<u></u>	Change
			□Add
			□Remove
			□Change
			□Remove
			Change
<del></del>			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

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	e date, if other than the date of filing: (optional)
Note: 1	e date, if other than the date of filing:
record d is tile	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after d.
Pated _	<u> </u>
	, , , , , , , , , , , , , , , , , , , ,
	Signature of a member of authorized representative of a member