

Electronic Filing Menu Corporate Filing Menu

Help

ARTICL	ES OF AMENDMENT	•		
	TO	÷.		
ARTICLE	S OF ORGANIZATIO OF	N		
	Or			
GOLDE	N GATE GROUP, LLC			
(Name of the Limited Liab) (A Flott	lity Company as it now appears on i da Limited Liability Company)	nur records.)		
The Articles of Organization for this Limited Liability	Company were filed on	2021	and assig	ned
Florida document number 4.21000015471				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin				
GOLDEN GATE GRO				
The new name must be distinguishable and contain the words "Li		non "Lt.C" or the al	obremation "E.I. (
Enter new principal offices address, if applicable:	N/A			
(Principal office address MUST BE A STREET ADD	<u>RESS)</u>			
		·····		20
	N/A		<u> </u>	21
Enter new mailing address, if applicable:			 مرک	
(Mailing address MAY BE A POST OFFICE BOX)				 5
			<u></u>	
B. If amending the registered agent and/or registere	ed office address on our record	s, enter the nam	£75.	T. Teredored
agent and/or the new registered office address here:			I'	പ
			۲.	1-
Name of New Registered Agent: N/A		· • •··· · · · · · · · · · · · · · · ·	- 	
New Registered Office Address:				
	Enter Flanda str	ect address		P
		, Florida		
			cip 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 heing filed to merely reflect a cliange 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

lf amendin <u>or removed</u>	g Authorized Person(s) authorized to a from our records:	on(s) authorized to manage, enter the title, name, and address of each person being added			
	MGR = Manager AMBR = Authorized Member				
Title	Name	Address	Type of Action		
•			Dadd		
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			Change		

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ive date, if other than the date of filing:	01/20/2021	(optional)

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 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 the record is filed.

JANUARY 22nd Dated of a member or settliorized representative of a member ARAMIS LOPE, JR, EA Typed or printed name of signee