

12/8/23, 4:42 PM

Division of Corporations

L21000029712

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

H230004200503

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : QUARLES & BRADY LLP
Account Number : I20000000067
Phone : (239)434-4922
Fax Number : (239)213-5452

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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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
G6 REAL ESTATE HOLDINGS, LLC**

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

H20004200503

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: G6 Real Estate Holdings, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angela Rose Gonzalez

Name of Person

Firm/Company

12230 SW 6th Street

Address

Miami FL 33184

City/State and Zip Code

angelitabella@icloud.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call.

Lorijane Martin

239 434-4904

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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 Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

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

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

G6 Real Estate Holdings, 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 Liability Company were filed on 01/27/2021 and assigned
Florida document number L21000029712

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Angela Rose Gonzalez

New Registered Office Address:

12230 SW 6th Street

Enter Florida street address

Miami

Florida 33184

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

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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

Title	Name	Address	Type of Action
AMBR	Jessica Reynoso Gonzalez	14962 SW 9th Terr Miami, FL 33194	☒ Add ☐ Remove
			☐ Change
AMBR	Jessenia Gonzalez	2945 SW 64th Ave Miami, FL 33155	☒ Add ☐ Remove
			☐ Change
AMBR	Caridad De La Regata	1165 W 42nd Place Hialeah, FL 33012	☒ Add ☐ Remove
			☐ Change
AMBR	Amada Gonzalez	10600 Bloomfield Drive APT # 712 Orlando, FL 32875	☒ Add ☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

E. Effective date, if other than the date of filing: _____ (optional)
 (If an 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 605.0207 (3)(b)
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.

* Dated December 08 2043.

Signature of a member or authorized representative of a member

* Angela Rose Gonzalez
Typed or printed name of signer

Filing Fee: \$25.00

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