

L21 0000 61607



(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

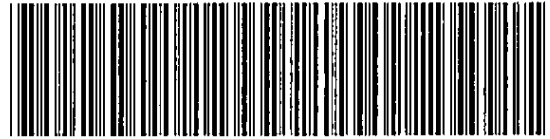
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GCM Kingdom Citizenship 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:

Sarah Takaylia Johnson

Name of Person

Firm/Company

901 NW 8th Avenue, Suite B8-1036

Address

Gainesville, FL 32601

City/State and Zip Code

sarahwhite.t@gmail.com

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

For further information concerning this matter, please call:

Sarah T. Johnson

352

870-0192

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ ^{MEW} \$30.00 Filing Fee &
Certificate of Status

☒ ^{MEW} \$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

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

GCM Jesus Kingdom Ministries 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 February 04, 2021 and assigned
Florida document number L21000061607.

This amendment is submitted to amend the following:

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

GCM Kingdom Citizenship LLC

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)

105 Juniper Drive

Hawthorne, FL 32640

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

901 NW 8th Avenue, Suite B8-1036

Gainesville, FL 32601

FILED
2024 FEB -6 PM 3:48
SECRETARY OF STATE
TALLAHASSEE, FL

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:

New Registered Office Address:

901 NW 8th Avenue, Suite B8-1036

Enter Florida street address

Gainesville

City

Florida

32601

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

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>	<u>Type of Action</u>
AMBR	Muriel Esther Whymes	105 Juniper Drive, Hawthorne, FL 32640	☐ Add
			☐ Remove
			☒ Change
			☐ Add
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			☐ Change

[illegible]

(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.

Dated January 31, 2024

Marisol Esther LeMaynes
Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Muriel Esther Whymes

Typed or printed name of signee