121000138807

(Requestor's Nan	ne)
(Address)	
(Address)	
(City/State/Zip/Pr	none #)
	MAIL
(Business Entity	Name)
(Document Numb	per)
(2002	
Certified Copies Certifica	aton of Status
Centiled Copies Centiled	
······	
Special Instructions to Filing Officer:	
	Peceived
	Received
	06130
	06170.
Office Use	Only 07/06/2/
	S.C.
	$\mathcal{O}(\mathcal{L})$

•1

h



07/01/21--01003--002 **25.00

JAN MAY 30 A H: 24



REGENTO

2021 JUN 30 PM 3: 10

and the second

اللا 🗟 ⁄ در با نا

.

 $\left(\cdot \right)$

JUN 0 7 2021

4 -

1.

17.

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2021

RICHARD JAROLEM, ESQ. 11770 U.S. HWY 1. SUITE 402 PALM BEACH GARDENS, FL 33408

SUBJECT: FLORIDA GNCW, LLC Ref. Number: L21000138807

We have received your document for FLORIDA GNCW, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Summer Chatham OPS

Letter Number: 621A00011851

 \bigcirc

Division of Comparations D.O. DOX 6207 Mollah appear Elevide 20214

COVER LETTER

...

TO:	Registration Section	
	D;vision of Corporations	

Florida GNCW, LLC SUBJECT:

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:

Richard Jarolem, Esq., Registered Agent

Name of Person

Traub Lieberman, Et. al.

Firm/Company

11770 US hwy 1, Ste 402

Address

Palm Beach Gardens, FL 33408

City/State and Zip Code

rjarolem@tlsslaw.com

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

For further information concerning this matter, please call:

181 FXY 130 **Richard Jarolem** 848-8300 at (______ Area Code Daytime Telephone Number Name of Person All Enclosed is a check for the following amount: \sim S60.00 Filing Fee, □ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) 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

APR 1 3 2021

Ő

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida GNCW, LLC		
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number <u>L21000138807</u> .	y were filed on <u>March 24, 2021</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lial	bility Company." the designation "LLC" or the a	bbreviation "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	e address on our records, <u>enter the nan</u>	
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	£
	, Florida	
	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	<u>Type of Actio</u>
MGR	Lee Efferson	7750 Okeechobee Blvd	□Add
		West Palm Beach, Fl 33411, US	
			Change
MGR	Lee Effenson	7750 Okeechobee Blvd	🖬 Add
		West Palm Beach, Fl 33411, US	🗆 Remove
			□Change
MGR	Jeff Fassano	5721 Soldiers Circle, 102	🗆 🖂 🖂 🖂
		Sarasota, FL 34231 US	🖹 Remove
			Change
MGR	Jeff Sassano	5721 Soldiers Circle, 102	🖬 Add
		Sarasota, FL 34231 US	()) □Remove
MGR	Joseph Villari	25 Stone Cirle	
		West Palm Beach, FL 33401	Remove
			Change
Mgr	Frederick J Villari	25 Stone Circle	🖬 Add
		West Palm Bcach, FL 33401	🗆 Remove
			□ Change

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

			-
			_
			-
			-
			-
			-
			-
			-
			_
			-
			-
			-
			-
			-
			-
		2021	•
	March 24, 2021		
E. Effec	tive date, if other than the date of filing: March 24, 2021 (optional ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fili I f the date inserted in this block does not meet the applicable statutory filing requirements, this date date date in the date inserted in this block does not meet the applicable statutory filing requirements.	al) 🚊 🔹 .	
(If an e Note	ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing the date insurted in this block does not most the applicable statutory filing requirements, this date is a set of the	ng.), Pursuant to 60:	5.0207 (3)(b)
docu	ment's effective date on the Department of State's records.	tte with not be list	ted as the
uocu	ment a cricente dale on me Department of State 3 records.	<u>ن</u> حد	
		= 7	
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)	The 90th day afte	r the
record is f	filed.	E	
D .	April 6, 2020		
Dated			
			K.
/	Signature of a member or authorized representative of a member		
- 14			
1	Frederick Joseph Villari		
/	Typed or printed name of signee		