

K22000099132

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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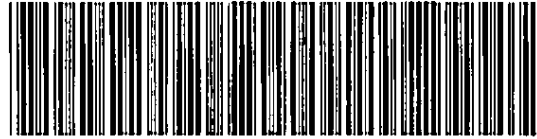
(Business Entity Name)

(Document Number)

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FILED  
2022 MAR 21 AM 6:58  
SECRETARY OF STATE  
TALLAHASSEE, FL

A. BUTLER  
APR 05 2022

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: GC WILLIAMS CONSULTING 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:

Gerald Williams

Name of Person

GC WILLIAMS CONSULTING LLC

Firm/Company

1100 US HWY 27 #137796

Address

CLERMONT, FL 34714

City/State and Zip Code

gaswilliams30@gmail.com

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

For further information concerning this matter, please call:

Gerald Williams

813

304-9450

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

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

**FILED**

GC WILLIAMS CONSULTING LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

2022 MAR 21 AM 6:59

SECRETARY OF STATE  
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 02/24/2022 and assigned  
Florida document number L22000099132.

This amendment is submitted to amend the following:

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

GCW CONSULTING GROUP LLC

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

Enter new principal offices address, if applicable:

1100 US HWY 27 #137796

**(Principal office address MUST BE A STREET ADDRESS)**

CLERMONT, FL 34714

Enter new mailing address, if applicable:

1100 US HWY 27 #137796

**(Mailing address MAY BE A POST OFFICE BOX)**

CLERMONT, FL 34714

**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:

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 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**

[illegible]

[illegible]

**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 March 16 2022

Signature of a member or authorized representative

Signature of a member or authorized representative of a member

Geord Williams

Typed or printed name of signee