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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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## **COVER LETTER**

TO:

TO: Registration Se Division of Cor			
	GE HOLDINGS LLC		
SUBJECT: `	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CARLOS ANDRES GON	ZALEZ LENGUA	
		Name of Person	
	GONDODGE HOLDING	S LLC	
		Firm/Company	
	1608 W SANDPOINTE L	N	
		Address	
	VERO BEACH		
	CARLOSGONZALEZ052	City/State and Zip Code I @ GMAHCOM	
	E-mail address: (	to be used for future annual report n	otification)
For further information c	oncerning this matter, please c	all:	
CARLOS ANDRES GO	NZALEZ LENGUA	917 2665705 at ()	
Name o	f Person	Area Code Dayı	ime Telephone Number
Enclosed is a check for the	ne 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 Addres Registration S		Street Address: Registration S	Section
Division of C		Registration Section Division of Corporations	
P.O. Box 632		The Centre of	
Tallahassee, l	ru 52314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF.

GONDODGE HOLDINGS LLC		2023 MAY -2 AH 7: 53		
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our recor Liability Company)	<u>(ds.)</u>		
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	and assigned		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "E.I.	C" 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:	1608 W SANDPOINTE LN			
(Mailing address MAY BE A POST OFFICE BOX)	VERO BEACH			
	F1, 32963			
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ente</u>	r the name of the new registere		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida street addre	700		
<del></del>	, <b>F</b>	lorida		

## New Registered Agent's Signature, if changing Registered Agent:

Thereby 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, <u>enter the title, name, and address of each person\_being added or removed from our records:</u>

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	SOOREH DODGE	1608 W SANDPOINTE LN	<b>■</b> Add
		VERO BEACH, FL. 32963	_
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Effective da	te, if other than the d	late of filing:		(ο	ptional)	
Note: If the	late is listed, the date must date inserted in this bloc effective date on the Dep	ck does not meet the	applicable statutory			
	ities a delayed effective	date, but not an effe	ective time, at 12:01	a.m. on the earlier of	† (b) The 90th day afte	er the
d is filed.						
4/28/3	2023		. /			
Dated		<del>`</del> `/_				
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Typed or printed name of signee