

9/23/24, 4:00 PM

Division of Corporations

L22000277924

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : GHSK SERVICES LLC
Account Number : I20210000099
Phone : (212)682-1800
Fax Number : (212)682-1850

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

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Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
GRUBEN LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
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M. SOLOMON
SEP 25 2024

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: GRUBEN 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:

Darlin Espinosa
Name of Person

Grant Herrmann Schwartz & Klinger LLP
Firm/Company

1001 Brickell Bay Drive Suite 1504
Address

Miami, FL 33131
City/State and Zip Code

billing@ghskllc.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL

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For further information concerning this matter, please call:

Darlin Espinosa 305 317-0104
Name of Person at Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$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

GRUBEN 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 06/17/2022 and assigned
Florida document number L22000277984.

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:

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

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- If amending Authorized persons, 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> |
|--------------|-----------------------|--------------------------------------|--|
| MGR | URS MEYER | 1001 BRICKELL BAY DRIVE | <input type="checkbox"/> Add |
| | | SUITE 1504 | <input checked="" type="checkbox"/> Remove |
| | | MIAMI, FL 33131 | <input type="checkbox"/> Change |
| MGR | MARIA CECILIA GONZAGA | c/o GHSK LLP 1001 BRICKELL BAY DRIVE | <input checked="" type="checkbox"/> Add |
| | | SUITE 1504 | <input type="checkbox"/> Remove |
| | | MIAMI, FL 33131 | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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