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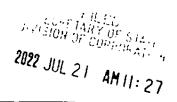
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COVER LETTER

TO:	Régistration Sec Division of Corp			
SUBJE	ECT: Golds GW T	ampa LLC		
0000.	<u> </u>		ited Liability Company	
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please	return all correspon	dence concerning this matter	to the following:	
		Kimberlee Curtis		
			Name of Person	· ·
		Golds GW Tampa LLC		
			Firm/Company	
		1209 E Cumberland Ave U	····	
			Address	
		Tampa, FL 33602		
		li-shada Othalaaa a	City/State and Zip Code	
		E-mail address: (to be used for future annual report noti	fication)
For fur	ther information co	ncerning this matter, please c	all:	
Kimbe	rlee Curtis		_at (513) 374-8987	
Name of Person			e Telephone Number	
Enclose	ed is a check for the	following amount:		
≡ \$23	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address: Registration Se Division of Co P.O. Box 6327 Tallahassec, Fl	ection rporations	Street Address: Registration Se Division of Con The Centre of T 2415 N. Monro Tallahassee, FL	porations allahassee e Street, Suite 810

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



Golds GW Tampa 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	y were filed on 7/11/2022	and assigned
Florida document number <u>L22000307885</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
GGW Tampa LLC		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LI	.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:	 	
(Mailing address MAY BE A POST OFFICE BOX)		
R. If amonding the registered agent and/or registered office	uddroes an our records, onto	or the name of the new registeres
agent and/or the new registered office address here:	address on our records, ente	i the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street addr	ress
	ľ	Florida
r new mailing address, if applicable: ling address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the new registered and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>	

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, 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>	Address	Type of Action
		· · · · · · · · · · · · · · · · · · ·	DAdd
			□ Change
			□ Add
	-		□Remove
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			□Remove

amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
		
		
		
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ffective date, if other than the date of filing: 07/08/2022 (optional) 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.) Pur ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will occurrent's effective date on the Department of State's records.	suant to 605.0 not be listed	0201 d as
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90 is filed.	th day after i	the
ated 07/19/2022		
Signature of a member or authorized representative of a member		
/		

Filing Fee: \$25.00