L22000355622

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	4/22

Office Use Only



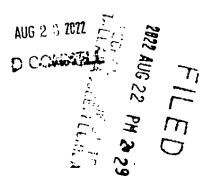
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GTB-BELCHER LLC				
				
				
			ı	Art of Inc. File
-				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend. File
			<u> </u>	RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
				Photo Copy
				Certificate of Good Standing
				Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
				Officer Search
				Fictitious Search
Signature		-		Fictitious Owner Search
v				Vehicle Search
			ļ <u> </u>	Driving Record
Requested by: SETH	08/19/22			UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
				UCC Retrieval
Walk-In	Will Pick Up			Courier

August 18, 2022

CAPITAL CONNECTION, INC.

SUBJECT: GTB-BELCHER LLC Ref. Number: L22000355622

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

GEORGE G. PAPPAS CAN ONLY SIGN FOR ASGHAR ALI IF HE HAS POWER OF ATTORNEY TO DO SO. IF THIS BE THE CASE, PLEASE ADD STATEMENT AS SUCH ON THE SPACE BELOW THE SIGNATURE LINE.

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.

Darlene Connell
Regulatory Specialist II Supervisor

Letter Number: 022A00018463

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COVER LETTER

TO: Registration Section

Tallahassec, FL 32314

Division of Cor	porations		
GTB-Belch	ner LLC		
SUBJECT:	Name of Lim	ited Liability Company	···
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	-	
Clease return an correspo	didence concerning this matter	to the following.	
	George G. Pappas		
		Name of Person	
	Pappas Law & Title		
		Firm/Company	
	1822 N. Belcher Rd., Suite	200	
		Address	
	Clearwater, Fl 33765		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information e	oncerning this matter, please c	all:	
George G. Pappas		727 447-4999	
Name o	f Person	at () Area Code Daytim	e 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		Street Address:	
Registration S		Registration Sec	
Division of C P.O. Box 632		Division of Cor The Centre of T	

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GTB-Belcher LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our recordited Liability Company)	ds.)
The Articles of Organization for this Limited Liability Comp	pany were filed on	and assigned
Florida document number L22000355622		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
N/A		
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	> 28
		7 7 7
		06 2
Enter new mailing address, if applicable:	N/A	N
(Mailing address MAY BE A POST OFFICE BOX)		
		7 8
R If amanding the vacietaved agent and/as registered -55		<u>`</u> " ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records, enter	the name of the new registered
Name of New Registered Agent: N/A		
	,	
New Registered Office Address:	Enter Florida street addres.	<u> </u>
	1912	or i da _
	City	Zip Code
Now Designationed Agently Clausers of the second of the second		

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, 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
MGR	Khoja, Abdul		
			=Remove
			☐ Change
MGR	MGR Lalani, Nooruddin		□Add
			■Remove
			☐ Change
MGR	Hamid, Abdul		□Ad d
			Remove
			□Remove
			Change
		-	□ ∧dd
			Remove
			ClChange
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			ПRепюче
			□ Change

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ectiv	e date, if other than the date of filing:
n eцес o <u>te:</u> I f	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed at the content of the content
cumen	nt's effective date on the Department of State's records.
cord : is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ted	
	40
	/bah / //
	Signature If a member or authorized tepresentative of a member

Filing Fee: \$25.00