| (Requestor's Name) |
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| (Address) |
| (City/State/Zip/Phone #) |
| (City/State/Zip/Prione #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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COVER LETTER

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|---|---|
| FO: Registration Sect Division of Corpo | |
| SUBJECT: | Gogh Holdings LLC Name of Limited Liability Company |
| The enclosed Articles of A | mendment and fee(s) are submitted for filing. |
| Please return all correspond | dence concerning this matter to the following: |
| | Dante D'Alessandro |
| | Gogh Holdings LLC Firm/Company |
| | 4213 Saint George Lane |
| | Naples, Florida 34119 City/State and Zip Code |
| | E-mail address: (to be used for future annual report notification) |
| For further information con | acerning this matter, please call: |
| Dante D'A | lessand/3 at (5/L) 859-8559 Person Area Code Daytime Telephone Number |
| Enclosed is a check for the ☐ \$25.00 Filing Fee | following amount: \$\Boxed{\Sigma} \\$30.00 \text{ Filing Fee & \$\Boxed{\Sigma} \\$60.00 \text{ Filing Fee & \$\Boxet{\Sigma} \\$60.00 \text{ Filing Fee & \$\Boxed{\Sigma} \\$60.00 Filing Fee & \$\B |

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Certificate of Status

Street Address:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Certificate of Status &

Certified Copy (additional copy is enclosed)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| G061+ 1+0 | | | | |
|---|---|-----------------------------------|----------------------|--------------------------|
| (Name of the Limite) | <mark>d Liability Company as i</mark> A Florida Limited Liabilit | it now appears on o y Company) | ur records.) | |
| The Articles of Organization for this Limited Lia Florida document number | | filed on | 3 1 - 2 3 | and assigned |
| This amendment is submitted to amend the follow | wing: | | | |
| A. If amending name, enter the new name of | the limited liability c | company here: | | |
| The new name must be distinguishable and contain the wo | rds "Limited Liability Co | mpany," the designa | tion "LLC" or the ab | obreviation "L.L.C." |
| Enter new principal offices address, if applica | ble: | | | |
| (Principal office address MUST BE A STREET | <u> "ADDRESS)</u> | | | |
| | | | | |
| Enter new mailing address, if applicable: | | | | |
| (Mailing address MAY BE A POST OFFICE B | <u></u> | . <u>.</u> | | |
| B. If amending the registered agent and/or reagent and/or the new registered office address | | ess on our record | ls, enter the nan | ne of the new registered |
| Name of New Registered Agent: | | | | |
| New Registered Office Address: | 4213 | Saint (| reel address | ine |
| | Naples | iiy | Florida | 3 4 11 9 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.

(Changing Registered Agent, Signature of New Registered Agent

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| n effective date is te: If the date | f other than the date of filing: listed, the date must be specific and coinserted in this block does not me live date on the Department of Sta | annot be prior to date of filing eet the applicable statutory | g or more than 90 days after five filing requirements, this o | ling.) Pursuant to 605.020 |
| ecord specifies s filed. | a delayed effective date, but not a | n effective time, at 12:01 | a.m. on the earlier of: (b) | The 90th day after th |
| ed | Dator | L=23. | | |
| | Signature of a me | ember or authorized represer | ntative of a member | |
| | <u>.</u> | • | | |