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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Danish N. alas)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

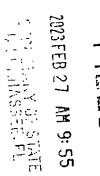
Office Use Only



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To: Florida Department of State

From: Grier Crosby

Date: 2/22/2023

RE: Request to change name of LLC

Please find included the appropriate document attached to change the current name of The GSC Group, LLC to Grier Crosby, LLC.

A check for \$30 for the fee is included.

Thank you for your help with this matter.

Respectfully,

Grier Crosby 757-714-1577 21234 Chatahoochee Ave.

grist Crosty

Venice, FL 34293

COVER LETTER

TO:	Registration Sec Division of Corp					
CHIDIE	The GSC G	roup, LLC				
SUBJE	Name of Limited Liability Company					
The enc	losed Articles of a	Amendment and fee(s) are subt	mitted for filing.			
Please r	eturn all correspo	ndence concerning this matter	to the following:			
	Grier Crosby					
			Name of Person			
		T	The GSC Group, LLC			
	Firm/Company 21234 Chatahoochee Ave, Address		4.4			
		21.	234 Chatahoochee Ave,			
Venice, FL 34293						
City/State and Zip Code						
e min cada			TheGSCGroup@gmail.com ss: (to be used for future annual report notification)	fication)		
For furt	ther information c	oncerning this matter, please ca				
Grier C		·	757 714-1577			
	Name o	f Person	at () Area Code Daytim	e Telephone Number		
Enclose	ed is a check for th	ne following amount:				
□ \$2:	5.00 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 Address Registration	<u>ss:</u> Section	<u>Street Address:</u> Registration Se	ction		

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	GSC Group, LLC	
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our real Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability C	Company were filed on	2023 and assigned
Florida document number L23000034062	<u></u> ·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
Grier Crosby, LLC		
The new name must be distinguishable and contain the words "Lin	nited 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 ADD	RESS)	2023 F
		2
Enter new mailing address, if applicable:		
		900 B
(Mailing address MAY BE A POST OFFICE BOX)		100 9
		<u> </u>
		i 1 1
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>e</u>	nter the name of the new registers
Name of New Registered Agent:		
New Registered Office Address:		
-	Enter Florida street a	ddress
		_, 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

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>	Name	Address	Type of Action
AMBR	Barry Crosby	21234 Chatahoochee Ave	
		Venice, FL 34293	■Remove
			□Change
			□Add
			□Remove
			Remove
			□Change
			\ _Add
			□Remove
			□Change
			□ Add
			Remove
			Change
			□Add
			□Remove
			□Change

Page 2 of 3

If amending any other informati			·.)
		•	
			
	<u>, </u>		
		<u></u>	
			
			<u></u>
			
			. <u> </u>
Effective date, if other than the (If an effective date is listed, the date must Note: If the date inserted in this ble document's effective date on the De	ock does not meet the applicable st	of filing or more than 90 days after filing attutory filing requirements, this date	.) Pursuant to 605.0207 will not be listed as
the record specifies a delayed The 90th day after the reco	effective date, but not an eord is filed.	effective time, at 12:01 a.m.	on the earlier of
Dated			
	aniscando /	representative of a member	
	Signature of a member or authorized	representative of a member	
	Grier Crosby		
	Typed or printed nam	n of signer	.

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Filing Fee: \$25.00