L23 000 321 616

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





200425584842

03/12/24--01021--021 **25.00

12371112 21 中34

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| GV Property Holdings LLC | | |
|--|---|-----------------------|
| (Name of the Limit | ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company) | • |
| Πιο Articles of Organization for this Limited Li | iability Company were filed on 07/06/2023 and and | assigned |
| Florida document number L23000321616 | | J |
| This amendment is submitted to amend the follo | owing: | |
| A. If amending name, enter the new name of | f the limited liability company here: | |
| The new name must be distinguishable and contain the w | vords "Limited Liability Company," the designation "LLC" or the abbreviation | "1.1.C." |
| Enter new principal offices address, if applic | able: | |
| (Principal office address MUST BE A STREE | TADDRESS) | |
| | | - |
| | | |
| Enter new mailing address, if applicable: | | r\sigma |
| Mailing address MAY BE A POST OFFICE | BON | |
| | | .15. |
| | | रठ - 40 |
| B. If amending the registered agent and/or regent and/or the new registered office addres Name of New Registered Agent: | registered office address on our records, enter the name of the ress here: Mitzabel VERQUEZ | <u>iew regist</u> |
| New Registered Office Address: | 2538 oak Stream drive Enter Florida street address | |
| | Green cove sings Florida 32043 | , |
| | City Zip Con | le . |

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 | JUAN CARLOS GELVES | 2538 OAK STREAM DRIVE | □Add |
| | | GREEN COVE SPRINGS, FL 32043 | ■Remove |
| | | | ©Clange |
| | | | LAdd |
| | | | □Remove |
| | | | □Change |
| | | | |
| | | | □Remove |
| | | | □Change |
| | | | |
| | | | □Remove |
| | | | □Clumge |
| | | | □ Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | ©Remove |
| | | | (TIChanga |

| | | · · |
|-----------------------------|---|---|
| | | |
| | | |
| _ | | |
| _ | | |
| _ | | |
| | | |
| | | |
| | | |
| _ | | |
| _ | | |
| | | |
| - | | |
| _ | | |
| _ | | |
| | | |
| _ | | |
| - | | |
| _ | | |
| _ | | |
| | | |
| ffectiv | tive date, if other than the date of filing: | (optional) |
| an effe o te: - f | fective date is listed, the date must be specific and cannot be prior to date of If the date inserted in this block does not meet the applicable sta | of filing or more than 90 days after filing.) Pursuant to 605,020 tutory filing requirements, this date will not be listed a |
| ocune | nent's effective date on the Department of State's records. | |
| | | |
| record Lis file | rd specifies a delayed effective date, but not an effective time, at I | 2:01 a.m. on the earlier of: (b) The 90th day after the |
| | | |
| | | |
| ated | March 3 . 2024 A | |
| ated _ | March 3 2024 | |
| ated _ | Signature of a member or authorized pa | المحلم |

Filing Fee: \$25.00

COVER LETTER

| GV Promi | erty Holdings LLC |
|---------------------------|--|
| | Name of Limited Liability Company |
| | Name of Limited Liability Company |
| | |
| The enclosed Articles o | of Amendment and fee(s) are submitted for filing. |
| Please return all corresp | pondence concerning this matter to the following: |
| | Sonia Becerra |
| | Name of Person |
| | Swyft Filings |
| | Firm/Company |
| | 3 Greenway Plaza #1320 |
| | Address |
| | Houston, TX 77046 |
| | City/State and Zip Code |
| | filings@swyftfilings.com |
| | E-mail address: (to be used for future annual report notification) |
| For further information | concerning this matter, please call: |
| Sonia Becerra | 877 777-0450 |
| Name | at (|
| | |
| Enclosed is a check for | the following amount: |
| ≡ \$25,00 Filing Fcc | ☐ \$30,00 Filing Fee & ☐ \$55,00 Filing Fee & ☐ \$60,00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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