LZ3000441698

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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entry Hame)
(Document Number)
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A HUNT

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 10/03/2023		**WALK IN**
ENTITY NAME Glen Ke	rnan GCC, LLC	
DOCUMENT NUMBER_		
	PLEASE FILE THE ATTACHED AND RETURN	1029 BCT -3
XXXXXXXX	Plain Copy	7-3
	Certified Copy Certificate of Status	PH 12: 4
/ 	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY Certified Copy of Arts & Amendments Certificate of Good Standing	
	APOSTILLE' / NOTARIAL CERTIFICATION	
COUNTRY OF DESTINAT NUMBER OF CERTIFICA		_ _
TOTAL OWED \$25	ACCOUNT #: 120160000072	
Please call Tina at th	he above number for any issues or concerns. Thank you so	much!

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divisio	on of Corp	oorations			
	LEN KER	NAN GCC, LLC			
SUBJECT:	· · · ·	Name of Lin	nited Liability Company		
The enclosed A	rticles of A	amendment and fee(s) are sub	omitted for filing.		
Please return all	l согт е ѕроп	dence concerning this matter	to the following:		
		JUSTIN HIGGINS			
			Name of Person		
		GLEN KERNAN GCC. L	LC		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	-
		1819 GOODWIN STREE	T		
			Address		
		JACKSONVILLE, FLOR	IDA 32204		
			City/State and Zip Code		
		JHIGGINS@CORNERLOT			
		E-mail address: (to be used for future annual i	report notification)	
For further infor	mation cor	icerning this matter, please co	all:		
JUSTIN HIGGI	NS		904 383 at()	3-9525	
	Name of 8	Person	Area Code	Daytime Teleph	one Number
Enclosed is a che	eck for the	following amount:			
= \$25.00 Filin	g Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy tudditional copy is each		\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Address: ration Sc	ction	<u>Street Ad</u> Registra	dress: tion Section	
_		porations		of Corporation	ons
P.O. B	ox 6327			tre of Tallaha:	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLEN KERNAN GCC, LLC				
(Name of the Limited (A	Liability Compa Florida Limited I	ny as it now appears of liability Company)	n our records.)	
The Articles of Organization for this Limited Liab Florida document number <u>L23000441698</u>	ility Company	were filed on SEPT	EMBER 22, 2023	and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	ne limited liab	ility company here:	:	
The new name must be distinguishable and contain the word	ls "Limited Lisbil	lity Company," the desig	mation "LLC" or the abbi	reviation "L.L.C."
Enter new principal offices address, if applicab	le:	1819 GOODWIN S	STREET	22 5
(Principal office address MUST BE A STREET.	<u>4DDREŞS)</u>	JACKSONVILLE, FLORIDA 32204		2023 00
			<u></u> .	90
Enter new mailing address, if applicable:		1819 GOODWIN S	STREET	-3 c
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	JACKSONVILLE,	FLORIDA 32204	
B. If amending the registered agent and/or registered office address h		ddress on our reco	rds, <u>enter the name</u>	of the new registered
Name of New Registered Agent:	JUSTIN HIGGI	INS .		
New Registered Office Address:	1819 GOODWI	N STREET		
		Enter Florida	street address	
_	JACKSONVILI	·	, Florida ³²²⁰	
		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>	<u>Name</u>	Address	Type of Action
MGR	GK GCC PARTNERS, LLC	1819 GOODWIN STREET	⊒Add
-		JACKSONVILLE, FLORIDA 32204	CRemove
			Change
			□AdJ
		· · · · · · · · · · · · · · · · · · ·	□Remove
			□Change
			CAdd 2023
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Effective date, if other than the	date of filing:			(optional)
If an effective date is listed, the date must Note: If the date inserted in this bl	st be specific and car ock does not mee	nnot be prior to date t the applicable s	of filing or mane that latutory filing requi	190 days after filing rements, this date	 Pursuant to 605.0207 (3) will not be listed as th
document's effective date on the D	epartment of State	e's records.	, ,		
e record specifies a delayed effectived is filed.	e date, but not an	effective time, at	12:01 a.m. on the	earlier of: (b) T	ne 90th day after the
OCTOBER 2	2	2023			
Dated	·	 ·			
//+	100	_			

Filing Fee: \$25.00

Typed or printed name of signee