Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240004128013)))



H240004128013ABCW

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To:

Division of Corporations

14154847068

Fax Number : (850)617-6383

From:

Account Name : GBS CONSULTANTS, INC.

Account Number : I20050000012 Phone : (954)659-8835 Fax Number : (954)301-0417

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ||cnub@gbsgroup.net

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN OFFSHORE BUSINESS SERVICES, LLC

Certificate of Status	0
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Page Count	03
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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Offshore Business Services, LLC	
(Name of the Limited Liability Company as it no (A Florida Limited Liability C	ow appears on our records.) ompany)
The Articles of Organization for this Limited Liability Company were file	ed on 12/15/2023 and assigned
Florida document number L23000553977	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability com	npany here:
he new name must be distinguishable and contain the words "Limited Liability Compa	any," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	- 22
	- · · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:	ω, ;=
Mailing address MAY BE A POST OFFICE BON)	1.6
	. 0.
	- (,)
3. If amending the registered agent and/or registered office address ogent and/or the new registered office address here:	on our records, <u>enter the name of the new reg</u>
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida 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 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
MGR	DIAZ, MARIA A.	7971 RIVIERA BLVD. SUITE 204	🗆 🗀 Add
		MIRAMAR, FL 33023	
			□Change
MGR	FERNANDEZ, JORGE E.	7971 RIVIERA BLVD. SUITE 204	🗆 Add
		MIRAMAR, FL 33023	
			☐ Change
			□Add
			□Remove
			☐ Change
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			□Remove
			□Change
			□Add
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			□Change
**************************************	-1-1-1		□Add
			Петоче
			□ Change

Effective date, if other than the date of filing: [If an effective date is listed, the date must be perior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Marte. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. e record 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 rd is filed. Dated December 16th 2024 December 16th 2024 Signature of a member or authorized representative of a member Jorge E. Fernandez				·	
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