25/9/25, 1:02 p.m.



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.

(((H25000344591 3)))



H250003445913ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC. Account Number : I20230000190

Phone : (844)449-3624 Fax Number : (512)597-0678

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

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **G & A PROPERTY SERVICES LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

T. LETTICX

SEP 2 6 2025

COVER LETTER

H25000344591 3

TO: Registration So Division of Cor			
G & A Pro	perty services LLC		
SUBJECT:	Name of Lin	iited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following	
	Diego Cruz		
		Name of Person	
	ZenBusiness INC		
		Firm/Company	
	336 E. College Ave Suite	301	
		Address	.
	Tallahassee, FL 32301		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	fulfillment@zenbusiness.co		
	E-mail address: (to be used for future annual report notif	fication)
For further information of	oncerning this matter, please c	all:	
c/o ZenBusiness INC		\$44 493-6249 at ()	
Name o	r Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	ne following amount		
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailina Addu	ia.	Street Address:	
Mailing Address: Registration Section		Registration Sec	ction
Division of Corporations		Division of Cor	
P.O. Box 6327		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	
Tallahassee, FL 32314		2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H250003445913

G & A Property services LLC		
Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000557978</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab		and assigned
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	10846 nw 40th st Sunrise, FL 3335	
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON) B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	10846 nw 40th st Sunrise, FL 3335 address on our records, enter the	22
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florid	la
New Registered Agent's Signature, if changing Registered Agent:	City	rip Cone
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capacity. I furthe performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and . Or, if this document is
II Cha	nging Registered Agent, Signature of Ne	w Registered Agent

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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

5125970678

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Giovanni Bracesco	10846 nw 40th st Sunrise, FL 33351	□ Add
			Remove
			. ■ Change
			© Add
			□Remove
			□ Change
		□ Add	
			□Remove
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			[Remove
			□ Change

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H250003445913

Dated 9/25 2025 /s/ Giovanni Bracesco Signature of a member or authorized representative of a member Giovanni Bracesco	. If amending any other inform	ation, enter change(s) here: (Attach additional sheets, if necessary.)	
Note: 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. The 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 ord is filled. Dated Solution Signature of a member or authorized representative of a member			_
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Dated 9/25 2025 /s/ Giovanni Bracesco Signature of a member or authorized representative of a member Giovanni Bracesco	Note: If the date inserted in this l	block does not meet the applicable statutory filing requirements, this date will not be li	05 0207 (3 sted as th
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Signature of a member or authorized representative of a member Giovanni Bracesco	Dated	2025	
Giovanni Bracesco	/s/ Giovanni Brac		
		Signature of a member or authorized representative of a member	
The set as accorded a case and observe.	Giovanni Bracesco	Typed or printed name of signee	