

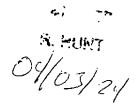
(R	equestor's Name)
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V.	33 33 3
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
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Certified Copies	Certificates of Status
Special Instructions to Fil	ling Officer:
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

GB2 INVESTMENT BROS LLC	
Please Debit FCA000000003 For: 25	
Thank you Seth Neeley	
Stall	Art of loc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File · · ·
	Trade/Service Mark
	Merger hile
	Art, of Amend, File S
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/ /	Officer Search
4	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC II Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO:

Registration Section

Division of Cor	porations			
	ESTMENT BROS LLC			
SUBJECT:	Name of Lin	ited 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:		
	Alexander B. Rotba	rt, Esq		
		Name of Person		
	The Rotbart Law Gr	oup, PA		
		Firm/Company	• • • • • • • • • • • • • • • • • • •	
	117 East Boca Rato	n Road	v.	:
		Address	<u> </u>	
	Boca Raton, FL 334	32	<u> </u>	
		City/State and Zip Code		7:1 0:03
	bngcontractorsgroup		<u> </u>	⊃ , . >
		to be used for future annual report no	tification)	
For further information c	oncerning this matter, please c	all:		
Alexander B. Rotb	art	at (<u>561</u>) 922-321		
Name o	l'Person	Area Code Daytii	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclo	
Mailing Address Registration S Division of C P.O. Box 632	Section Corporations	Street Address: Registration So Division of Co The Centre of	rporations	
Tallahassee,			be Street, Suite 810	

Tallahassee, Fl. 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GB2 INVESTMENT BROS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	1.11. C		2024	, ,
The Articles of Organization for this Limited Lia	bility Company	were filed on 2707		and assigned
Florida document number L24000066898	 ·			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of (the limited liab	ility company here	2:	
GB2 INVESTMENTS BROS LLC				,
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the desi	gnation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applica		N/A		•
(Principal office address MUST BE A STREET	(ADDRESS)			<u> </u>
				<u> </u>
			ኒ' <i>*</i> ተካ፣	င္မာ
Enter new mailing address, if applicable:		N/A		ණ. 03
(Mailing address MAY BE A POST OFFICE BOX)				
				
B. If amending the registered agent and/or regagent and/or the new registered office address Name of New Registered Agent:		address on our rec	ords, <u>enter the nam</u>	e of the new registered
New Registered Office Address:	N/A			
		Enter Florida	i street address	_
			Florida	
	-	Сиу	Florida	Zıp Code
New Registered Agent's Signature, if changing Re	gistered Agent:			
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has	and complete ered agent as p gistered office	performance of morovided for in Ch	y duties, and I am f apter 605, F.S. Or,	amiliar with and if this document is

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
N/A	N/A	N/A	🗖 Add
			_ Remove
			Change
			🗖 Add
			Remove
			Change
			<u>©</u> Add
		· · ·	Remove
			Change C⊃ CD
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ctive date, if other than the	te date of filing: ust be specific and cannot be prior to date of filing	(optional)	(05.03
	block does not meet the applicable statutory		
	Department of State's records.		
ord specifies a delayed effect	ive date, but not an effective time, at 12:01 a	i.m. on the earlier of: (b) The 90	th day after th
filed.			
And O	2024		
April 2	2024		
Gustavo Ravila	Signature of a member or authorized represent		
<u> </u>	2 C N T 1		
Gustavo Carilaro (Apr. 2, 2024-20,4	100		

Filing Fee: \$25.00