

L24000406368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

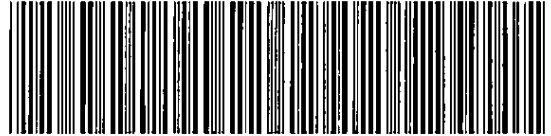
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

LLC

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TALLAHASSEE, FL

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MLL

8/1/24



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 4, 2024

GUNNAR COOK
11466 SUMTER GROVE WAYM UNIT 9209
NAPLES, FL 34113

SUBJECT: GUSTAVO CENTRAL NAPLES LLC
Ref. Number: L24000106368

We have received your document for GUSTAVO CENTRAL NAPLES LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Corporation, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please (850) 245-6050.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 824A0000728

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GIUSTAVO CENTRAL NAPLES LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gunnar Cook
Name of Person

BUD KELLY HOLDINGS LLC
Firm/Company

317. N. Collier Blvd
Address

Mario Island, FL 34145
City/State and Zip Code

gunnar @ GTCCBOLLC.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine Hernandez-Baez at (520) 255-9939
Name of Person Area Code Daytime Telephone Number
(Business Manager)

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
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

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

GUSTAVO CENTRAL NAPLES LLC

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

The Articles of Organization for this Limited Liability Company were filed on 3/1/24 and assigned
Florida document number L24000100368.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

BUD KELLY HOLDINGS LLC

New Registered Office Address:

317 N. Collier Blvd, #101

Enter Florida street address

Marco Island

City

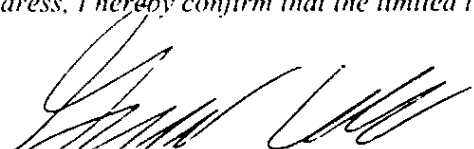
Florida

34145

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

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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MGR/AMBR	GUNNAR COOK	11466 Sumter Grove Way	<input type="checkbox"/> Add
		Unit 9209 Naples, FL	<input checked="" type="checkbox"/> Remove
		34113	<input type="checkbox"/> Change

			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

MGR	BUD KELLY HOLDINGS LLC	317 N. Collier Blvd	<input checked="" type="checkbox"/> Add
		#101 Marco Island, FL	<input type="checkbox"/> Remove
		34145	<input type="checkbox"/> Change

			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated July 19, 2024.

[Signature]

Gunnar Cook
Typed or printed name of signer

Filing Fee: \$25.00