## L240003071580

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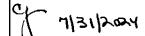
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## **COVER LETTER**

TO: Registration Sec Division of Corp			
SUBJECT: <u>GV</u>	Res-Q LLC		
SUBJECT:	Name of Limi	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Geovanny	Valleju	
	GV Res-	Rirm/Company	
		Firm/Company	
	18330 NW 8	<b>S</b> +	
	1000	Address	
	Pemboxe Pi	ines F1 33020	1
	10119111 0 11	City/State and Zip Code	1
		gnail. Com	
	E-mail address: (	to be used for future annual report notif	fication)
For further information co	oncerning this matter, please ca	all:	
Geovanny Val	lejo	at (305) 898-C	617
Name of	Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		<u>Street Address:</u> Registration Sec	ction
Registration Section Division of Corporations		Division of Cor	
P.O. Box 632		The Centre of T	
Tallahassee, l	1. 32314	Z410 IN. IVIONIO	e Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GV Res-a LL		2024 JUL 29 FM 7: 33
( <u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears of a Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability C Florida document number <u>L24000307580</u>	Company were filed on <u>6<sup>†</sup>7</u> 	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	:
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the desig	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del>	
(Principal office address MUST BE A STREET ADD)	RESS)	
	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	d office address on our reco	ords, <u>enter the name of the new regis</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	a street address
<u></u>	Pin.	Florida Zip Code
	City	Z.tp 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>	<u>Name</u>	Address	Type of Action
AMBR	Amaris Vallejo	18330 Nw 85+ Pembroke Pines Fr	733097 □Add
			ERemove
			Change
			□ Add
			□ Remove
			Change
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		<del></del>	Change
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Note:	ive date, if other than the date of filing:
f the recor ecord is fi	d 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 led.
Dated	July 19 , 2024.
	Que de la companya della companya de
	Signature of a member or authorized representative of a member
	Geovanny Valleju Typed or printed name of signee
	Typed or printed name of signee