L24000368091

(Requestor's Name)	
,	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer.	

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COVER LETTER

TO:

Registration Section

Division of Corporations

SUBJECT: GA	be Herrington Re	altor LLC	
	Name of Lin	nited Liability Company	
	of Amendment and fee(s) are sub	•	
r lease return an corres	pondence concerning this matter	to the following.	
	Gabriel	He (ring to 1) Name of Person	
		Name of Person	
		Firm/Company	
	3101 Edgemon	or S+ Address	
	pajatica FL,	3 2 1 7 7 City/State and Zip Code	
		City/State and Zip Code 1	
For further information	n concerning this matter, please c		
Gabriel Her Name	Cin Ston of Person	at (386) 538- Area Code Daytim	o 4 6 3 ne Telephone Number
Enclosed is a check for	the 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)
<u>Mailing Addr</u> Registration		Street Address: Registration Se	ction
Division of	Corporations	Division of Cor	porations
P.O. Box 63 Tallahassee		The Centre of T 2415 N. Monro	allahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(-1 - 11 - 15 -	<i>o</i>		,			
(Name of the Dimited I	ドゥルート inbility Comp	anvasit no	W appears of work	File and S	- 41,7	_
Cabe Herrington (Name of the Limited L	lorida Limited	Liability Co	ompany)	De di res-	PM 10: 36	
The Articles of Organization for this Limited Liabil	ity Company	y were file	on <u>8 ∫ê</u> £	iljako.	zy STATand	assigned
Florida document number L24000368091	·				_	
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of the	e limited lial	bility com	pany here:			
Gabriel Herrington LLC The new name must be distinguishable and contain the words						
The new name must be distinguishable and contain the words	"Limited Liab	ility Compa	ny." the designation	"LLC" o	r the abbreviation	ı "L.L.C."
Enter new principal offices address, if applicable	::	3101	Edgenoor	<u>5</u> +	palatea	FL 32171
(Principal office address MUST BE A STREET A	DDRESS)					
					 	
Enter new mailing address, if applicable:		3101	Eglewoor	<u> </u>	palatica	FL 32177
(Mailing address MAY BE A POST OFFICE BO)	<u>v)</u>		<u> </u>			
					_	
B. If amending the registered agent and/or regis agent and/or the new registered office address he		address o	n our records, g	enter th	e name of the	new registere
Name of New Registered Agent:	N/A					
New Registered Office Address:						
		I	Enter Florida street	address		_
_				_, Flori	da	
		City			Zip Co	nde

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

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>	Type of Action
		 	□ Add
			□Remove
			□Change
		-	□ Add
		·	□Remove
			□ Change
			□Add
			□Remove
			Change
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			□ Add
			□ Remove
			Change
_			
			□Remove
			Change

	
	
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ective date, if other than the date of filing: 9/24/2024 (optional effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing: If the date inserted in this block does not meet the applicable statutory filing requirements, this date turnent's effective date on the Department of State's records.	ng.) Pursuant to 605.020 ite will not be listed a
·	
cord 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
s filed.	•
red 9/24/2024 ,	
Signature of a member or authorized representative of a member	
Signature of a member or authorized representative of a member	

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