

MO7 00005694

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE

AUG 31 2010

EXAMINED

MO7-5694

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GFI Bynnton Beach-DC 4602 LLC  
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer Boji  
Name of Person

GFI Bynnton Beach  
Firm/Company

3400 Bloomingdale Ave  
Address

Melrose Park, FL 32660  
City/State and Zip Code

jenniferboji@yahoo.com  
E-mail address: (to be used for future annual report notification)

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2010 AUG 30 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jennifer Boji at ( 708 ) 344 1004  
Name of Person Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE  
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

**SECTION I (1-3 must be completed)**

1. Name of limited liability company as it appears on the records of the Florida Department of State: GRI Boynton Beach-DC LLC, LLC
2. Jurisdiction of its organization: Michigan
3. Date authorized to do business in Florida: ~~09-21-07~~ 9-21-07

**SECTION II (4-7 complete only the applicable changes)**

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? NA
5. New name of the limited liability company: \_\_\_\_\_  
(must end with "Limited Liability Company," "L.L.C.," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." or "LLC.")

6. If the amendment changes the period of duration, indicate new period of duration: NA
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction: NA

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: John Guzzardo 35%, Amy Guzzardo, 30%  
Bart Guzzardo 35% -members

9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized

\_\_\_\_\_  
Signature of a member or the authorized representative of a member

Amy Guzzardo  
Typed or printed name of signer

**Filing Fee: \$25.00**

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2010 AUG 30 AM 11:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA