M11000000473/

(Re	questor's Name)		
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Do	cument Number)	_	
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
<u> </u>	-		

Office Use Only



800324531618

02/19/19--01020--020 **25.00

2018 FEB Z / FR 4 - 144



COVER LETTER

0:

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

Д	
Limited Liability Company	
	EB FEB
submitted for filling.	27 ASST
itter to the following:	2018 FEB 27 PK 4: 44
Silverstein	المنافقة الم
Name of Person	
OPERTY SERVICES, LLC	
Firm/Company	
ison Blvd. #320	
Address	
NC 28211	
•	
ress: (10 be used for future annual report not	fication)
se cali:	
724 QUIT-	.2290
Area Code Daytin	ne Telephone Number
□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET/COUR Registration Section	IER ADDRESS:
	Firm/Company ISON Blvd. #320 Address NC 28211 City/State and Zip Code Caprelick brothus. Comess: (to be used for future annual report not se call: at (704) 947- Area Code Daytin S55.00 Filing Fee & Certified Copy (additional copy is enclosed)

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

APPLICATION BY FOREIGN LINITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

	13
1. Name of limited liability Company as it appears of	the records of the Florida Department of
State: GOAL-FLORIDA, LLC	
Enter new principal office address, if applicable:	2019 FEB
(<u>l'rincipal office address</u> <u>MUST BE A STREET ADDRESS</u>)	\$3 2 2 Sage 2
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	M17000004731
2. The Florida document number of this limited liabi	liù company is: 10117000004731
3. Jurisdiction of its organization: Delau	
4. Date authorized to do business in Florida: 05/0	2/2017
SECTION II (5-9 complete only the applicable ch	adges)
5. New name of the limited liability company: (must e	octain "Limited Liability Company, " "L.L.C.," or "LLC.")
	the purpose of transacting business in Florida and attach a ghig members adopting the alternate name. The alternate name of "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office additions.	officer address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida Street Address , Florida
	City Zip Code
New Registered Agent's Signature, if changing Regis	uired Agent:
I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper are and accept the obligations of my position as register.	and agree to act in this capacity. I further agree to comply with a complete performance of my duties, and I am familiar with a capacity agent as provided for in Chapter 605, F.S. Or, if this are registered office address, I hereby confirm that the limited

7. If the amend	ment changes the jurisdiction of organi	tation, indicate new jurisdiction:
8. If the amend	ment changes person, title or capacity in	accordance with 605.0902 (1)(e), indicate that change:
Title/ Capacity	<u>Namç</u>	Address Type of Action
MGR	ISAAC W. KYLE	6836 MORRISON BLVD. #320 □ Add
		CHARLOTTE, NC 28211
MGR	TODD GORELICK	6836 MORRISON BLVD. #320
		CHARLOTTE, NC 28211
MGR	RUSSEL SOMERDAY	6836 MORRISON BLVD. #320
		CHARLOTTE, NC 28211
MGR	GIANCARLO GONZALEZ	6836 MORRISON BLVD. #320
		CHARLOTTE, NC 28211 Remove
		Add
aforemention	nder the law of which this entity is are Signature of	the official having custody of records in the

Filing Fee: \$25.00