(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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DEC 2 2 2021

**ALBRITTON** 

Incorporating Services, Ltd.

incserv

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

# **ORDER FORM**

Florida Department of State

FROM Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 12/16/2021	PRIORITY Regular Approval	OUR REF # (Order ID#) 982639
ORDER ENTITY GC OPCO HOLDING, LLC		
PLEASE PERFORM THE FOLLOW GC OPCO HOLDING, LLC (F		
GC OFCO HOLDING, LLC (F	<u>L)</u>	
File the attached amendment	F)	
	<u>-1</u>	

### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Thursday, December 16, 2021



## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 17, 2021

**INCSERV** 

SUBJECT: GC OPCO HOLDING, LLC

Ref. Number: M21000015752



This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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 call (850) 245-6050.

Irene Albritton
Regulatory Specialist III

Letter Number: 121A00030568

Please hence the evigence submission date as the file date, thanks to the

2021 DEC 21 PM 3: 16

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FÉQRIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it appears     GC OPCO HOLDING, LLC	·
Enter new principal office address, if applicable:	
( <u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u> )	0.7
Enter new mailing address, if applicable:	
( <u>Mailing address</u> <u>MAY BE A POST OFFICE BON</u> )	7.9 - 4.
	69.
	bility company is: M21000015752
3. Jurisdiction of its organization: Delaware	
4. Date authorized to do business in Florida: 11/23	2/2021
SECTION II (5-9 complete only the applicable of	
5. New name of the limited liability company: Maximus (must	atrix Adhesives Group, LLC contain "Limited Liability Company, " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name [27] or "LLC.")
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad	ed officer address on our records, <u>enter the name of the new</u> <u>ldress here:</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida Street Address
<del>-</del>	. Florida City Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as registe	it and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with cred agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited

If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), ind				
le/ Capacity	<u>Name</u>	Address	Type of Action	
			□Add	
			Remo	
<del></del>	<u></u>		□Add	
			□Remo	
			□Add	
			□Remo	
			□Add	
			□Remo	
			□Add	
aforementione	ertificate, if required: no more than 90 d amendment(s), duly authenticated by der the law of which this entity is organ	the official having custody of records	□Remo	

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'GC OPCO HOLDING,

LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO

"MATRIX ADHESIVES GROUP, LLC" ON THE SIXTH DAY OF DECEMBER, A.D.

2021, AT 6:46 O'CLOCK P.M.



Authentication: 205036036

Date: 12-20-21