

H22000429325 3

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**M22000007652**

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
G.C.M. AND AIR-MARTIME CUSTOMS BROKERAGE COMPANY LIM**

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K. Brumley

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: G.C.M. AND AIR-MARTIME CUSTOMS BROKERAGE COMPANY LIMITED, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing

Please return all correspondence concerning this matter to the following.

BABWAH, DEANNE

Name of Person

Firm/Company

320 NE 36TH ST

Address

OAKLAND PARK, FL 33334

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

REGINALD, SUSAN

475 296-8015

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

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☐ \$60.00 Filing Fee,  
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(additional copy is enclosed)

Mailing Address:

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

Street Address:

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G.C.M. AND AIR-MARTIME CUSTOMS BROKERAGE COMPANY LIMITED, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 05/17/2022 and assigned  
Florida document number M22000007652.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L."

Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: REGINALD, SUSAN

New Registered Office Address: 320 NE 36TH ST

*Enter Florida street address*

OAKLAND PARK, Florida 33334

*City*

*Zip 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 Changing Registered Agent, Signature of New Registered Agent**

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated 12/21/2022

Signature of a member or authorized representative of a member

BABWAH, DEANNE

Typed or printed name of signee

**Filing Fee: \$25.00**