206000116887

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

A. LUNT

MAY 1 4 2009

EXAMINER

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SECRETARY OF STATE
ALLAHASSEE, FINDER

COVER LETTER

| ΓO: Registration S Division of Co | | | |
|---------------------------------------|--|---|--|
| SUBJECT: | Global | Vision, LLC | |
| | Name of Limite | ed Liability Company | |
| The enclosed Articles of | f Amendment and fee(s) are subr | nitted for filing. | |
| Please return all corresp | ondence concerning this matter t | to the following: | |
| | F | Philip L. Logas, Esq. | |
| | | Name of Person | |
| | P | Philip L. Logas, P.A. | |
| | | Firm/Company | |
| | 121 S. C | Orange Avenue, Suite 1470 | |
| | | Address | |
| | Or | lando, Florida 32801 | |
| | | City/State and Zip Code | |
| | plo | ogas@logaslaw.com | A' |
| | E-mail address: (to | be used for future annual report notifica | ition) |
| For further information | concerning this matter, please ca | ili: | |
| Philip | o L. Logas, Esq. | at (407) 8 | 49-1555 |
| Name | of Person | at (407) 8 Area Code & Daytime | 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) |
| | | | |

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| Global Vis | ision, LLC | |
|---|---|---------|
| (Name of the Limited Liability Compa (A Florida Limited | nany as it now appears on our records.) Liability Company) | |
| The Articles of Organization for this Limited Liability Company | ny were filed onDecember 7, 2006 and assigned | d |
| Florida document numberL06000116887 | | |
| | • | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited liab | bility company here: | |
| Worldwide Auction Ro | | |
| The new name must be distinguishable and end with the words "Lim "L.L.C." | nited Liability Company," the designation "LLC" or the abbrev | viatíor |
| Enter new principal offices address, if applicable: | 2000 TAL | |
| (Principal office address MUST BE A STREET ADDRESS) | ARE A | |
| | AS: | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | 8 | |
| | | |
| B. If amending the registered agent and/or registered of | | : new |
| registered agent and/or the new registered office address her | <u>re</u> : | |
| Name of New Registered Agent: | | |
| New Registered Office Address: | | |
| registered office (ragioss). | Enter Florida street address | |
| | , Florida | |
| | 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

| MGRM = Managing Member | | | | | |
|------------------------|--------------------------------------|--|---------------------------|--|--|
| <u>Title</u> | <u>Name</u> | Address | Type of Action | | |
| | | | Add Remove | | |
| | | | Add Remove | | |
| | | | Add Remove | | |
| | | | Add C Remove | | |
| | | | Afti | | |
| | | | ∯ Ω. □ ARRI □Remove | | |
| D. If amend | ding any other information, enter cl | hange(s) here: (Attach additional sheets, if necessary.) | _ | | |
| | | | <u> </u> | | |
| | | | _ _ | | |
| Dated | May 12, _ | 2009 | | | |
| | Signature of a me | ember or authorized representative of a member | | | |
| | - | Philip L. Logas, Esq. | | | |
| | \overline{T} | yped or printed name of signee | | | |

Page 2 of 2

Filing Fee: \$25.00