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D. SCOTT MAR 3 0 2017

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Paccus Global 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:
Than T. Leanon Name of Person
Baews Global LLC Firm/Company
/ Nerrth Federal Highway
Boca Raton FL 33432 City/State and Zip Code ihan @ backes/le: Com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Than T. Lennon Name of Person at (561) 289-4310 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, □ \$60.0

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

Baccus Glos	bal LLC
	Liability Company as it now appears on our records.) Florida Limited Liability Company)
The Articles of Organization for this Limited Liabi	lity Company were filed on May 23, 2008 and assigned
Florida document number <u>LO 800005</u>	1601.
This amendment is submitted to amend the followi	ng:
A. If amending name, enter the new name of th	e limited liability company here:
The new name must be distinguishable and contain the words	s "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	e:
(Principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BO	<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>enter the name of the new</u> e address here:
Name of New Registered Agent:	
New Registered Office Address:	
rem registered office realisas.	Enter Florida street address
-	, Florida City
New Registered Agent's Signature, if changing Reg	
I hereby accept the appointment as registered a provisions of all statutes relative to the proper accept the obligations of my position as register	ngent and agree to act in this capacity. I further agree to complywith the and complete performance of my duties, and I am familiar with and red agent as provided for in Chapter 605, F.S. Or, if this document is is istered office address, I hereby confirm that the limited liability
	If Changing Registered Agent, Signature of New Registered Agent

If amending and or removed for	Authorized Person(s) authorized to m	anage, enter the title, name, and address of ea	ch person being added
MGR = Ma AMBR = Au	nager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Doca Rator, FL 33432	Remove
			Change
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ocument's effective date	e on the Department of S	State's records.			
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e record specifies a The 90th dav after	delayed effective of the record is filed.	date, but not an .	errective time, at	12:01 a.m. onthe	earlier:
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ated March	10	, 2017.		35.5	
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	Signature of a	member or authorized	representative of a memb	er E	OF STE
	2.5. a Due ot a	Or worlding		<u> </u>	بن پيـي

Page 3 of 3

Filing Fee: \$25.00