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SECRETARY OF STAFE
TARLAHASSEE FLORIDA

B. BOSTICK
NOV - 2 2012
EXAMINER

COVER LETTER

TO:	Registration S Division of Co		, 1 .				
CHDH	ect.	RH GLOBAI	SOLUTIONS LLC	€ ⁹⁶			
SUBJI	Name of Limited Liability Company						
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please	return all corresp	ondence concerning this matter	to the following:				
SUSANA BIJANI			_				
			Name of Person				
	JP GLOBAL BUSINESS SOLUTIONS INC			_			
			Firm/Company				
7325 NW 36TH ST							
	Address			_ ∑ ∽.	57.		
			MIAMI, FL 33166		E C	2 NO	-71
	City/State and Zip Code				- HAS	7 -	1:3
		JOSE.PE	REZ@DANIELAHART	.COM	338		
For fu	rther information	concerning this matter, please of	to be used for future annual repor call:	i notification))E STAL FLORI	PH 12: 23	Ö
	SU	SANA BIJANI	at (305)	436-0093	A W	ယ	
	Name	of Person		Paytime Telephone Numb	рег		
						/	
Enclos	sed is a check for t	the following amount:	,				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	Certific	Filing Fee, cate of Sta ed Copy onal copy		osed)
	Regist Divisi P.O. E	LING ADDRESS: tration Section on of Corporations Box 6327 trassee, FL 32314	Registration : Division of C Clifton Build	Corporations ing ve Center Circle			

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	AL SOLUTIONS L					
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appea Limited Liability Company)	rs on our records.)				
The Articles of Organization for this Limited Liability (Company were filed on	09/19/2012	and assigned			
Florida document number L12000122861	·					
This amendment is submitted to amend the following:						
A. If amending name, enter the new name of the lim	nited liability company he	<u>re</u> :				
The new name must be distinguishable and end with the wo	ords "Limited Liability Comp	any," the designation "L	LC" or the abbreviation			
Enter new principal offices address, if applicable:						
(Principal office address MUST BE A STREET ADD	RESS)					
			<u> </u>			
Enter new mailing address, if applicable:		(HASS	2 7			
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	<u> </u>			
		STAL	<u> </u>			
B. If amending the registered agent and/or registered agent and/or the new registered office add	stered office address on lress here:	our records, enter t	he 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 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> <u>Address</u> Type of Action **MGRM** ROWNDY VILLASMIL 807 PORSHE AVE ✓ Add Remove SEBRING, FL 33872 ☐ Remove ☐ Add ☐ Remove ∏ Add Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) 10/29/2012 Dated WILFREDO HERNANDEZ Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00