L12000135365

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COVER LETTER

TO:							
SHRI	JECT:						
501	LCI.		Name of Limit	ed Liability Company			
The e	nclosed	l Articles of	Amendment and fee(s) are subn	nitted for filing.			
Please	e return	all correspo	ondence concerning this matter to	o the following:			
			Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)				
				Name of Person			
	•		Brinkley Morgan				
			· · · · · · · · · · · · · · · · · · ·	Firm/Company			
			200 E. Las Olas Blvd., Suite	e 1900			
Address							
Fort Lauderdale, Florida 33301							
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For fu	orther is	oformation c	·		The control of the co		
Mark A. Levy			oneoning this matter, preuse cur	954 522-2200	ी सहित्स का जिल्हा		
		Name o	f Person		e Telephone Number		
Enclo	sed is a	check for th	ne following amount:				
5 2	25.00 F	iling Fee	-	Certified Copy	Certificate of Status & Certified Copy		
MAILING ADDRESS: Registration Section			ration Section	Registration Section			
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 2015 DEC 28 AM 11: 27

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Duncan Global, 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 Florida document number L12000135365	were filed on 10/23/2	012 and assigned		
This amendment is submitted to amend the following:				
AIf amending name, enter the new name of the limited liabi	ility company here:			
Takuya Duncan, LLC				
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designa	ation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices 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)	•			
(Mulling dadress MAT BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered off	fice address on our	records, enter the name of the nev		
registered agent and/or the new registered office address here	:	· - · · · · · · · · · · · · · · · · · ·		
Name of New Registered Agent:				
New Registered Office Address:				
Nogistered Office / Nationals.	Enter Florida st	reet address		
	, Florida			
	City	Zip Code		
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p	performance of my a provided for in Chapt	luties, and I am familiar with and		

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Takuya Suzuki	164 Bank Street, Apt. 3B	■ Add
		NY NY 10014	□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Remove
			□ Change
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ective date, if other the effective date is listed, the te: If the date inserted incument's effective date of	date must be specification this block does:	ic and cannot be p not meet the ap	plicable statute	ling or more than ory filing requi	(optional) 90 days after filing ements, this date	g.) Pursuant to 605.020	7 (3)(b s the
record specifies a d he 90th day after t			not an effe	ctive time, a	at 12:01 a.m.	on the earlier o	f:
ed December 24		2015	<u></u> •				
	<i>1</i> 7\\	0					
- Hau	N UW	of a member or a	authorized repre	sentative of a me	mber		

Page 3 of 3

Filing Fee: \$25.00