## 117000197137

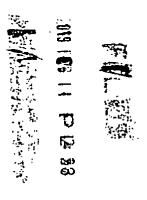
(Re	questor's Name)	
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(Cit	ry/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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T. LEMEUX

## **COVER LETTER**

ГО:	Registration Sec Division of Corp			
511D 1E/	~ TEP -	ERGY TO GO LLC		
SUBJEC	-1:	Name of Lim	ited Liability Company	<del> </del>
The encl	osed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please ro	eturn all correspor	ndence concerning this matter	to the following:	
		YOESLY CARVAJAL		
		ACAI ENERGY TO GO L	Name of Person	
		6800 20TH AVE N #107a	Firm/Company	<u>-</u>
		ST PETERSBURG FL 337	Address 710	<del></del>
		YCAPTA@HOTMAIL.CO	City/State and Zip Code M	
		E-mail address: (	to be used for future annual report notifi	cation)
For furth	ner information co	oncerning this matter, please ca	all:	
YOESL	Y CARVAJAL		786 3952614	
	Name of	Person		Telephone Number
Enclosed	i is a check for th	e following amount:		
<b>□</b> \$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:

TO:

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

旅舞 细胞

ACAI ENERGY TO GO LLC	
(Name of the Limit	ed Liability Company as it now appears on our records. (A Florida Limited Liability Company)
	(A Florida Limited Liability Company)
The Articles of Organization for this Limited L	iability Company were filed on 2/7/19 and assigned
Florida document number L17000197137	
This amendment is submitted to amend the following	owing:
A. If amending name, enter the new name o	f the limited liability company here:
GLOBAL INVESTING MANAGEMI	ENT LLC
The new name must be distinguishable and contain the v	ords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:
(Principal office address MUST BE A STREE	T ADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE	BOX)
	or registered office address on our records, enter the name of the new
registered agent and/or the new registered o	ffice address here:
	TRUBY TAYLOR
Name of New Registered Agent:	TRUDY TAYLOR
New Registered Office Address:	1029 CENTRAL AVE SUIT 201
	Enter Florida street address

## 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.

City

ST PETERSBURG

If Changing Registered Agent, Signature of New Registered Agent

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

	Authorized Member		
Title	<u>Name</u>	Address	Type of Action
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			☐ Remove
		<del></del>	Change
			D Add
			☐ Remove
			☐ Change
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		<del></del>	□ Remove
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			☐ Remove
			☐ Change
			Add
			Remove
			☐ Change
			D Add
			□ Remove

\_\_\_\_ Change

ıı ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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lf an eff	ive date, if other than the date of filing:
docum	ent's effective date on the Department of State's records.
ne red The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	2/8/19
	Signature of a member of authorized representative of a member
	YOESLY CARVAJAL

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00