L18000136091

(Re	questor's Name)	
	dress)	
(Au	uiess)	
(Ad	dress)	
(0)	WCtate (7) = (Db == -	- 40
(Cr	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
	ainaa Falib. Maa	
ud)	siness Entity Nar	ne)
(Do	cument Number)	
0-48-4-01	G-4:5:4	
Certified Copies	_ Ceπincates	s or Status
Special Instructions to	Eiling Officer:	
Opecial instructions to	r illing Officer.	

Office Use Only



700382092047

03/07/22--01035--001 **80.00

2022 MAR -7 AM 8: 14 SECRETARY OF STATE

A. BUTLER MAR 17 2022

COVER LETTER

TO:

Registration Section Division of Corporations

GLOBAL INDUSTRY PARTNERS, LLC SUBJECT: 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: MANUEL FICEVALLOS Name of Person GLOBAL INDUSTRY PARTNERS, LLC. Firm/Company 9091 LIME BAY BLVD., SUITE 110 Address TAMARAC, FL. 33321-8639 City/State and Zip Code meevallos@globalindustrypartners.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: MANUEL CEVALLOS Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ☐ \$60.00 Filing Fee. ☐ \$55,00 Filing Fee & ■ \$30,00 Filing Fee & ☐ \$25.00 Filing Fee Certified Copy Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed). (additional copy is enclosed) Street Address: Mailing Address: Registration Section Registration Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF FILED

GLOBAL INDUSTRY PARTNERS, LLC.

company has been notified in writing of this change.

STRY PARTNERS, LLC.

(Name of the Limited Liability Company as it now appears on our records.)

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company) SECRETARY OF STATE

The Articles of Organization for this Limited Liability Company were filed on 05/31/264sLABASSEE, FL and assigned Florida document number $\frac{1.18000136091}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Bruno Francesco Cevallos	2320 PONCE DE LEON BLVD.	≣ Add
		CORAL GABLES, FL. 33134	□ Remove
			□ Change
			□Add
			□Remove
			□Change
			□Remove
			□ Change
			□ Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□ Change

								-
		·	<u> </u>	_		_ _		-
								_
		<u>-</u>		<u></u> ,		-		
								_
				<u>-</u>	<u></u>			_
	<u> </u>	· · · · · · · · · · · · · · · · · · ·						=
								_
						-		_
			-					_
								_
	_							
		<u>-</u> .			<u>-</u>			_
							<u>.</u>	_
								_
								_
Effective date, if other than the If an effective date is listed, the date is	ie date of fili	ng:			(optional)	. D)
If an effective date is listed, the date of Note: If the date inserted in this	iust be specific a block does not	nd cannot be p meet the an	orior to date of olicable stati	filing or more itory filing ra	than 90 days equirement	satter filing. s, this date) Pursuant to 60 will not be lis	35.0207 sted as
document's effective date on the	Department of	State's reco	rds.					
re record specifies a delayed effectord is filed.	ive date, but n	ot an effectiv	ve time, at 12	2:01 a.m. on	the earlier (of: (b) - Th	e 90th day afi	ter the
February 26 Dated		2022						
Dated								
			-					
			<u> </u>	resentative of				

Typed or printed name of signee