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D. BRUCE

NOV 18 2010

EXAMINER

COVER LETTER

TO: Registration Division of	s Section Corporations			
SHDIECT.	GLOBAL RE	EACH GROUP, LLC.		
SUBJECT:		nited Liability Company		
The enclosed Articles	of Amendment and fee(s) are su	abmitted for filing.		
Please return all corre	espondence concerning this matte	er to the following:		
		ALEJANDRO ANAYA		
		Name of Person		
	GLOI	BAL REACH GROUP, LLC		
		Firm/Company	\$-} ₆ =	
	321	17 DIAMOND KNOT CIR.	10 NOV 17	
	•	Address	ASS	
		TAMPA/FL 33607		
		City/State and Zip Code	Y DE STE	
	E-mail address:	lejoanaya@gmail.com (to be used for future annual report notification)	<u> </u>	
For further information	on concerning this matter, please	•	<i>"></i>	
	EJANDRO ANAYA	at (_813) 362-		
Nan	ne of Person	Area Code & Daytime Telep	hone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	3\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Reg Div P.C	AILING ADDRESS: gistration Section ision of Corporations b. Box 6327 lahassee, FL 32314	STREET/COURIER AI Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLOB	AL REACH	H GROUP, LI	_C		
(Name of the Limited L (A F	i <mark>ability Compa</mark> Torida Limited I	ny as it now appear Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Lial	bility Company	were filed on	05/04/2009	and as	ssigned
Florida document numberL09000427	<u>'98</u> .				
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited liab	ility company her	<u>·e</u> :		
The new name must be distinguishable and end with	the words "Limi	ited Liability Compa	nny," the designation	"LLC" or the	abbreviation
"L.L.C."					
Enter new principal offices address, if applicat	ole:		ND KNOT CIR.	- S.	
(Principal office address MUST BE A STREET	ADDRESS)	TAMPA, FL 3	33607		> ≥
				Tr. S	= 1
				38K = 1	1
Enter new mailing address, if applicable:		3217 DIAMO	ND KNOT CIR.	(L) (S)	2
(Mailing address MAY BE A POST OFFICE BOX)		TAMPA, FL 3	33607	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, <u>enter</u>	the name	of the new
Name of New Registered Agent:	ALEJANDR	O ANAYA			
New Registered Office Address:	3217 DIAMOND KNOT CIR				
	Enter Florida street address				
		TAMPA	, Florida	3360)7
		City		Zip Cod	te

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 afteres, 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>	Name	Address	Type of Action
MGRM	OTTAVIO F CARLETTI	5716 PINEY LANE DR. TAMPA FL 33625 US	Add ✓ Remove
			Add Remove
			Add Remove
·			Add Remove
			Add Remove
			Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if nec	essary.)
			TO NOV
_	·		
Dated	November 11	7 2010 M M	PH 3:58
	Signature of a r	nember of authorized representative of a member	
		ALEJANDRO ANAYA Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00