## L03000039996

(Requestor's Name)
(Address)
(Address)
(Hadioss)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
L03-39996
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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07/16/10--01014--013 \*\*35.00

FILED 10 JUL 29 AM 9: 59 SECRETARY OF STATE ANASSEE, FLORIDA



July 19, 2010

ALEJANDRO WEINSTEIN 3815 STATE ROAD 64TH EAST BRADENTON, FL 34208

SUBJECT: GLOBAL SYSTEMS L.L.C.

Ref. Number: L03000039996

We have received your document for GLOBAL SYSTEMS L.L.C. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Letter Number: 110A00017385

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Global Systems LLC Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Alexandro Weinstern		
Glosal Systems LLC Firm/Company		
3815 State Rd 64th E		
Bradenton, Fl 34201 City/State and Zip Code		
<u>akrandrokuns tein O Glos al</u> - Systens. ORS  E-itail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
A lex Warre of Person at (941) 747 3246  Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount:		
\$25 Filing Fee & Certified Copy		

	75 <b>6</b>	
STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY		
Pursuant to the provisions of sections 608.416 or 608.5 liability company submits the following statement in order agent, or both, in the State of Florida.	08, Florida Statutes, the undersigned limited or to change its registered office or registered	
1. Name of the limited liability company: 600a Systems Lie 3		
2 (a) Principal office address of limited liability company	/:	
(Note: MUST BE STREET ADDRESS)	1500 15th Audre East Palactto FL 34200	
(b) Mailing address of limited liability company:	,	
(Note: MAY BE POST OFFICE BOX)	<u>Same</u>	
and the second of the second o		
3. Date of filing/registration in Florida  OC+ 29, 2003	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
Registered Agent:	Alegandro Weinstein	
Registered Office Address:	1500 15th Ave dr E.	
	Palmetto, Pt 74208	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	Alerry Mdr. Velultein	
NEW Registered Agent:	7015 Clark 10 1 (1111)	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	3813 314 RG 6447 4.	
	Bradentin ,FL 34208	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.		
Signature of a member or authorized representative of a member	_	
Printed or typed name of signee	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to oper and complete performance of my duties, sition as registered agent as provided for in rely reflect a change in the registered office has been notified in writing of this change.	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00