

L05000113727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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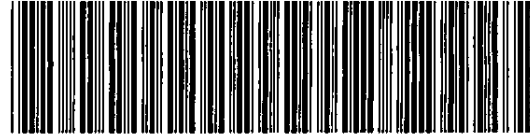
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12/20/12--01004--019 \*\*35.00

FILED  
13 FEB -8 PM 1:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 7, 2013

ALFONSO GUTIERREZ  
GLOBALNET COMMUNICAITONS GROUP LTD. CO.  
1825 PONCE DE LEON BLVD., #524  
CORAL GABLES, FL 33134

SUBJECT: GLOBALNET COMMUNICATIONS GROUP LTD. CO.  
Ref. Number: L05000113727

**FILED**  
13 FEB - 8 PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

We have received your document for GLOBALNET COMMUNICATIONS GROUP LTD. CO. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because this company is an LLC it cannot use the corporation amendment form.

Please complete, sign, and return the enclosed LLC AMENDMENT FORM.

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) 245-6051.

Buck Kohr  
Regulatory Specialist II

Letter Number: 113A00000338

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: GLOBALNET COMMUNICATIONS GROUP LTD. CO.

Name of Limited Liability Company

FILED  
13 FEB -8 PM 1:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**ALFONSO GUTIERREZ**

Name of Person

GLOBALNET COMMUNICATIONS GROUP LTD. CO.

Firm/Company

**1825 Ponce De Leon Blvd. # 524**

Address

**Coral Gables, FL 33134**

City/State and Zip Code

**amgtaxservices@yahoo.com.mx**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ALFONSO GUTIERREZ** at **(786) 382-5831**

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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:

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**

GLOBALNET COMMUNICATIONS GROUP LTD. CO.

(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 were filed on 11/28/2005

Florida document number L05000113727

**FILED**  
13 FEB -8 PM 4:40  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 end with 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)**

1825 Ponce De Leon Blvd. # 524

Coral Gables, Fl 33134

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1825 Ponce De Leon Blvd. # 524

Coral Gables, Fl 33134

**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:

ALFONSO GUTIERREZ

New Registered Office Address:

1825 Ponce De Leon Blvd. # 524

*Enter Florida street address*

Coral Gables

Florida 33134

*City*

*Zip Code*

**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 address, 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHINEAU, SILVIA T	1825 Ponce De Leon Blvd. # 524	<input checked="" type="checkbox"/> Add
		Coral Gables, Fl 33134	<input type="checkbox"/> Remove
MGRM	CHAJIN, CARLOS F	1825 Ponce De Leon Blvd. # 524	<input checked="" type="checkbox"/> Add
		Coral Gables, Fl 33134	<input type="checkbox"/> Remove
MGR	MICHINEAU, SILVIA T	10773 NW 58TH ST # 508	<input type="checkbox"/> Add
		DORAL FL 33178	<input checked="" type="checkbox"/> Remove
MGRM	CHAJIN, CARLOS F	10773 NW 58TH ST # 508	<input type="checkbox"/> Add
		DORAL FL 33178	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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Dated FEBRUARY 07, 2013



Signature of a member or authorized representative of a member

**ALFONSO GUTIERREZ**

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**