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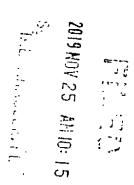
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## **COVER LETTER**

	OBAL MANAGEMENT LLC				
SUBJECT:Name of Limited Liability Company					
	16	wined for Gling			
	Amendment and fee(s) are subm				
Please return all correspo	ondence concerning this matter t	o the following:			
	ISHTYKOVA, YULIYA				
	TITAN GLOBAL MANAC	Name of Person JEMENT LLC	<u>,</u>		
		Firm/Company	<del></del>		
	2101 Atlantic Shores Blvd,				
		Address			
	Hallandale Beach				
	titanusa@gmail.com	City/State and Zip Code	<del></del>		
	E-mail address: (t	to be used for future annual report notif	ication)		
For further information	concerning this matter, please ca	all:			
ISHTYKOVA, YULIY.	A	7.54 799 0327 at ()			
Name	of Person	Area Code Daytim	e 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

Registration Section

**Division of Corporations** 

TO:

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

TITAN GLOBAL MANAGEMENT LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) \_\_\_\_ and assigned Florida document number \_\_\_\_\_\_L06000048126 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

New Registered Agent's Signature, if changing Registered Agent:

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 ompany has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

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

## MGR = Manager AMBR = Authorized Member

<u>Title</u> MGRM	<u>Name</u> ISHTYKOVA, YULIYA	Address 2101 Atlantic Shores Blvd, Apt 106, Hallandale Beach, Florida,	Type of Action
		33009	B Add
			Remove
			☐ Change
			■ Add
			П Remove
			☐ Clunge
<del></del>			
		<del>-</del>	Remove
			Change
			П Реточе
			Change
			Remove
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			Remove
			□ Change

•	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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E 6043	10/22/2018
(H an ch	ve date, if other than the date of filing:
	The date inserted in this proce does not need the applicable stability filling requirements this date will not be the day
docum	ent's effective date on the Department of State's records.
The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
	19# S
Dated	18th of /November 2019
·vacca _	
	Allen .
	Signature of a member or authorized representative of a member
	TARUSIN, SERGEY, MGRM
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00