L07000020034

(Re	equestor's Name)		
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SECRETARY OF STATE
TALLAHASSEF FI TOOL

COVER LETTER

TO: Registration Sec Division of Corp	
SUBJECT: Global	Billing Services, LLC (Document No. L07000020034) (Name of Limited Liability Company)
The enclosed Articles of A	mendment and fee(s) are submitted for filing.
Please return all correspon	dence concerning this matter to the following:
	Mark J. Bryn
	(Name of Person)
	Bryn & Associates, P.A.
	, (Firm/Company)
	2 South Biscayne Blvd., Suite 2680
	(Address)
	Miami, FT 33131
	(City/State and Zip Code)
For further information co	ncerning this matter, please call:
Janet (Name of	
Enclosed is a check for the	following amount:
\$25.00 Filing Fee	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) 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



Global Billing Service			
(<u>Name of the Limited</u> (A	Liability Company as it no A Florida Limited Liability Co	ow appears on our records.) ompany)	
The Articles of Organization for this Limited L	iability Company were file	d on <u>2/22/2007</u>	and assigned
Florida document number <u>L07000020034</u>	·		•
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	f the limited liability com	pany here:	
SBW.COM, LLC The new name must be distinguishable and end with			1.02 4 11 14
"L.L.C." B. If amending the registered agent and/or the new registered of		ess on our records, <u>enter tl</u>	ic name of the new
Name of New Registered Agent:	N/A		
New Registered Office Address:	N/A		
		(Enter Florida street add	ress)
	N/A (City)	, Florida <u>N</u>	/A (Zip Code)
	(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:

1

MGR = Manager

Γitle	<u>Name</u>	. Address	Type of Action
N/A	N/A	N/A	□ Damova
N/A	. N/A	N/A	Add Remove
N/A	N/A	N/A	— ~
N/A	N/A	N/A	Damous
N/A	N/A		Add Remove
N/A	N/A	N/A	Add Remove
D. If am	ending any other information, en	nter change(s) here: (Attach additional she	SECRET
Dated	May 6		-7 AMII: I
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Filing Fee: \$25.00