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(Re	equestor's Name)	
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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

Contract

D. BRUCE

OCT 2 2009

EXAMINER

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	СТ:	B Global Real E	Estate Resources, LLC		
		Name of Limi	ted Liability Company		
The end	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please 1	return all correspo	ndence concerning this matter	to the following:		
			Meriel W. Bryan		
			Name of Person		
		Global F	Real Estate Resources, LLC		
-			Firm/Company		
		2719 Ravella Way Address		Ž o	
)9 0 LLA	
		Palm Be	ach Gardens, Florida 33410) 	CI - I PHIZ ETARY OF ST HASSEE, FLO
			City/State and Zip Code		SEE - L
		hon	eybee1010@gmail.com		L ED I PMP: 55 RY OF STATE SEE. FLORIDA
		,	to be used for future annual report notifica	tion)	ORIE ORI
For furt	her information co	oncerning this matter, please of	eall:		DA S
		riel W. Bryan		25-1323	
	Name of	f Person	Area Code & Daytime T	elephone Number	
Enclose	ed is a check for th	e following amount:			
\$25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &

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

B Global Real Estat	e Resource	s, LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now apper Liability Company)	ars on our records.	
The Articles of Organization for this Limited Liability Company	were filed on	May 16, 2007	and assigned
Florida document numberL07000051907			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	ere:	
Global Real Estate			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Comp	pany," the designation "L	LCZ or the abbreviation
Enter new principal offices address, if applicable:	Same as pre	evious	
(Principal office address MUST BE A STREET ADDRESS)			\$ - F
			ri e ga
Enter new mailing address, if applicable:	Same as pre	evious	D STATE FLORID
(Mailing address MAY BE A POST OFFICE BOX)			D .
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter t	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida street add	ress
<u></u>		, Florida	
	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>	Name		Address	Type of Action	1
				Add Remove	
				Add Remove	
,	<u></u>			Add Remove	
				Add Remove	
				Add Remove	
				Add Remove	
D. If amend	ding any other info	ormation, enter char	nge(s) here: (Attach additional sheets, if necessary.	09 OCT -1 PH 12: SECRETARY OF ST	1
Dated		Signature of a memb	ber or authorized representative of a member	7.55 TATE ORIDA	ا <i>ل</i>
		Meriel W	V. Bryan, CEO & President		

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00