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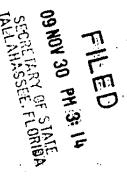
(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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Office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



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S. HAWKES

DEC -1 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ		OBAL ONE TRUST, LC of Limited Liability Company	_
	Tunie or	Telimica Elacinity Company	
Dear S	Sir or Madam:		
The e	nclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.	
Please	return all correspondence concerning	ng this matter to the following:	
	JOHN ROJAS		
	Name of Person		
	GLOBAL ONE TRUST, L	_C	
	Firm/Company		
	690 SW 1st CT. # 2728	3	
	Address		
	MIAMI, FL. 33130		
	City/State and Zip Code		
E-	VERJOHNCO@MSN.CO	The state of the s	
For fu	rther information concerning this mat	atter, please call:	
	JOHN ROJAS	at (786) 487-4247	
	Name of Person	Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS:	MAILING ADDRESS:	
	Registration Section	Registration Section	
	Division of Corporations	Division of Corporations	
	Clifton Building	P.O. Box 6327	
	2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
	Enclosed is a check for the following	ving amount:	
	\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company:	GLOBAL ONE TRUST, LC				
2. (a) Principal office address of limited liability compa	any: 690 SW 1st CT. # 2728				
(Note: MUST BE STREET ADDRESS)	MIAMI, FL. 33130				
(b) Mailing address of limited liability company:	690 SW 1st CT. ₩2728				
(Note: MAY BE POST OFFICE BOX)	MIAMI, FL. 331308				
MAY/24/2007	L07000055142				
3. Date of filing/registration in Florida	4. Document number				
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
Registered Agent:	JOHN ROJAS				
Registered Office Address:	36 ISLAND AVE. # 34 MIAMI BEACH, FL. 33139				
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> :					
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	690 SW 1st CT. # 2728 MIAMI, ,FL33130				
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 of authorized representative of a member JOHN ROJAS Printedor typed name of signce					
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 60B, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability composition.	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.				
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00					

INHS18 (05/08)