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SECRETARY OF STATE

D. BRUCE
JAN 3 1 2008
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 6lobal Group America LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Dania Vinuela (Name of Person)
Wost International Consulting, LLC (Firm/Company)
18501 Pines Blud., Ste 337
Pembroke Pines FL 33029 (City/State and Zip Code)
For further information concerning this matter, please call:
Dania Vinuela (Name of Person) at (964) 237 - 236 1 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \times \text{S30.00 Filing Fee & Certificate of Status} \text{ \$\text{Certified Copy (additional copy is enclosed)}} \text{ \$\text{S60.00 Filing Fee, Certified Copy (additional copy is enclosed)}} \text{ \$\text{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

(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 41/27/2007 and assigned Florida document number Lo7000118437.			
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."			
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: 18501 Pines Blvd, Ste 337 (Enter Florida street address)			
Pomoroke Pines, Florida 330 29 (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 **Type of Action Address** Title ' <u>Name</u> Harcos Perez 18501 Pines Blud., Ste 303 PPINES, FL 33029 MGR Daysi M. Nicolaides HGR Add Remove \Box Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated January 28 Signature of a member or authorized representative of a member H. Hario Porez Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00