

108000024352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2017 SEP 29 PM 2:01  
U.S. DEPT. OF JUSTICE  
FBI - NEW YORK

K. SALY  
OCT - 2 2017

September 27, 2017

Registration Section

Division of Corporations

I recently was informed by my attorney that my name is listed as AMBR in the Global Bridge Holdings, LLC and it should be remove immediately. At any time I have become a partner or member of this company; I have not conduct any type of business or earned any profit from this LLC Company. Even so, Michael Conlon is my acquaintance; I have not given any verbal or written authorization to him to add my name into his company.

Attached, I am sending the form **Amend the Articles Of Organization Of a Florida Limited Liability Company along with a check of \$25** for you please to remove my name from this limited liability company as soon as you receive it.

If you need further information, you can contact me at 727-504-1722 or my e-mail [girlezac@yahoo.com](mailto:girlezac@yahoo.com).

**Please send a copy of the issued letter of acknowledgement to me as well at P.O. BOX 47441, ST Petersburg, FL 33743-7441**

Thank you for your help,



Girleza Sharp

P.O. BOX 47441

St Petersburg, FL 33743

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Global Bridge Holdings, 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:

Michael Conlon  
Name of Person

Global Bridge Holdings, LLC  
Firm/Company

5000 Colbreath Keyway suite 8-216  
Address

Tampa, FL 33611  
City/State and Zip Code

mc@globalbridgeholdings.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Girleza Sharp at ( 727 ) 504-1722  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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 Bridge Holdings, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

FILED  
2017 SEP 29 PM 2:01

The Articles of Organization for this Limited Liability Company were filed on 3/7/2008 and assigned  
Florida document number L08000024352.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

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:

N/A

New Registered Office Address:

Enter Florida street address

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 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 company has been notified in writing of this change.*

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Girleza Sharp	P.O. Box 47441	<input type="checkbox"/> Add
		St Petersburg, FL 33743	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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FILED  
2011 SEP 29 PM 2:01  
CLERK OF COURT  
JULIA HARRIS

2011 SEP 2  
14:44:55  
14:44:55

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2011 SEP 29 PM 2:01  
U.S. DISTRICT COURT  
NORTH DISTRICT OF CALIFORNIA

Effective date, if other than the date of filing. \_\_\_\_\_ (Optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated September 27, 2017

Signature of a member or authorized representative of a member

Girlza Sharp

Typed or printed name of signee