

LO8000040275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

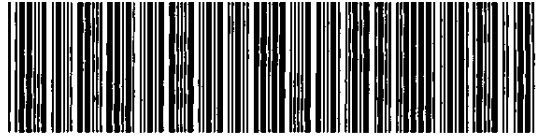
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900162203619

10/29/09--01028--020 \*\*60.00

FILED

09 OCT 29 PM 1:59

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

S. HAWKES

OCT 30 2009

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Global Solutions 4, 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:

Jacqueline N. Miller

Name of Person

Global Solutions 4, LLC.

Firm/Company

6601 Lyons Road, Suite C-5

Address

Coconut Creek, FL 33073

City/State and Zip Code

ynieves@globalsolutions4.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacqueline N. Miller

Name of Person

at ( 954 )

428.1990

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☒ \$60.00 Filing Fee,  
Certificate of Status &  
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 Solutions 4, LLC.

(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 04.22.08 and assigned

Florida document number L08000040275

**FILED**  
09 OCT 29 PM 1:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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."

**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: Jacqueline N. Miller

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 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.*

*J. Miller*  
\_\_\_\_\_  
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

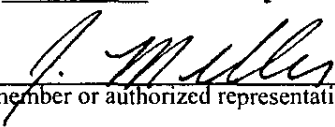
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Yolanda Nieves	10751 Fox Glen Drive Boca Raton, FL 33428	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Rosa Nieves	8729 Chevy Chase Drive Boca Raton, FL 33433	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Patricia Davis	301 SW 8th Court Delray Beach, FL 33444	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Rolando Nieves	22290 Woodspring Drive Boca Raton, FL 33428	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Leslie Martorano	22290 Woodspring Drive Boca Raton, FL 33428	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Michael & Debra Rosenfeld	21254 Falls Ridge Way Boca Raton, FL 33428	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

FILED  
 OCT 29 PM 1:59  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Dated October 28, 2009

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
 \_\_\_\_\_  
 Jacqueline N. Miller  
 \_\_\_\_\_  
 Typed or printed name of signee