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(F	Requestor's Name)	
(4	Address)	
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(0	City/State/Zip/Phone #)	<u> </u>
PICK-UP	☐ WAIT	MAIL
- (E	Business Entity Name)	<del></del>
I)	Document Number)	
Certified Copies	Certificates of	Status
Special Instructions	to Filing Officer:	

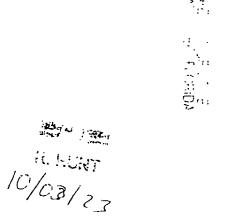
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**CAPITAL CONNECTION, INC.**417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Obercantor LL	С		 <sub> </sub>			
Please Debit FO	CA000000003 For:	25				
Thank you Seth	Neelev					
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				LTD Partnership File	2023 GCT	<u>( )</u> .
				Foreign Corp. File		
				L.C. File	<b>ل</b>	
				Fictitious Name File		(1.7) - (1.7)
				Trade/Service Mark	. ?:	-
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				RA Resignation		
				Dissolution / Withdrawal		
			\	Annual Report / Reinstatement	<del></del>	
			—	Cert. Copy		
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				Corp Record Search	-	
1	/ /			Officer Search		
				Fictitious Search		
Signature	7		_	Fictitious Owner Search		
			_	Vehicle Search		
			_	Driving Record		
Requested by: $_{ m SE}$	TH			UCC 1 or 3 File		
Name	Date	Time	·	UCC 11 Search		
				UCC 11 Retrieval		
Walk-In	Will Pick U	Jp		Courier		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ompany as it now appears on outlited Liability Company)	r records.)	<u></u>	
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liability company here:			
Liability Company," the designation	on "LLC" or the abbrev	iation "L.L.	<del></del>
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emer rigitaa siree	i acaress		
City	, Florida	Lin Code	
	liability company here:  Liability Company," the designation  Liability Company, the designation  Liability Company, the designation  Enter Florida street	Enter Florida street address  Florida	and assig  liability company here:  Liability Company." the designation "LLC" or the abbreviation "L.L.  Company." the designation

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>	Name	Address	Type of Action
MGR	G & G MANAGEMENT US LLC	20803 Biscayne Blvd Ste 310	
		AVENTURA, FL 33180	≣Remove
			□Change
MGR	GLOBAL TAXES LLC	667 MADISON AVE, 5TH FL	<b>≣</b> Add
		NEW YORK, NEW YORK 10065	□Remove
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Effective date, if other than the da (If an effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Depart	specific and cannot be prior to date of filing or more that does not meet the applicable statutory filing requ	(optional) n 90 days after filing.) Pursuant to 605.0207 irements, this date will not be listed as	(3)( the
ne record specifies a delayed effective d ord is filed.	nte, but not an effective time, at 12:01 a.m. on the	earlier of: (b) The 90th day after the	
Dated	2023		
Si	hature of a member or authorized representative of a me	ember	
G & G MANAGEMENT I	ISTIC.		
—————	Typed or printed name of signee		