## LOA000072450

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10 MAY 10 PM 1:03 SECKETARY OF STATES ALLAHASSEF, FLORIO

D. BRUCE

MAY 1 1 2010

**EXAMINER** 

## **COVER LETTER**

TO:

Registration Section

Division of Corporations				
SUBJECT:	GHG 007 LLC  Name of Limited Liability Company			
	Name of Entitled Liability Company			
The enclosed Articles of A	Amendment and fce(s) are submitted for filing.			
Please return all correspon	ondence concerning this matter to the following:			
	ODED YEOSHOUA	_		
	Name of Person	_		
	GLOBAL HORIZONS GROUP LLC Firm/Company	_		
	3301 NE 1 <sup>St</sup> AVE #2610	_		
MIAMI, FL 33137  City/State and Zip Code				
	City/State and Zip Code			
	ODED@GLOBALHORIZONSGROUP.COM  E-mail address: (to be used for future annual report notification)			
For further information co	concerning this matter, please call:	AY 10 PM		
SOBY GAGO				
Name of	of Person Area Code & Daytime Telephone Number	PH 1:03		
Enclosed is a check for th	he following amount:	·		
\$25.00 Filing Fee	(additional copy is enclosed) Certifie	ate of Status &		
Registra Division P.O. Bo	ING ADDRESS: ration Section on of Corporations ox 6327 assee, 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

O	
GH6 027	116
(Name of the Limited Liability Compa (A Florida Limited I	
The Articles of Organization for this Limited Liability Company Florida document number 20900072450	were filed on JULY 28, 2009 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	De la constant
	ASSA GO
Enter new mailing address, if applicable:	TG R III
(Mailing address MAY BE A POST OFFICE BOX)	STATE OF
	<u>Ori W</u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address

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.

City

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

Title Name <u>Address</u> Type of Action Add MOFET M.P LTD ZMON Add Remove □Add Remove Add Remove ∏Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) APRIL Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00