

LA 000084186

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

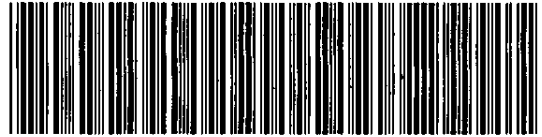
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

NOV - 5 2009

EXAMINER



500162282025

11/04/09--01038--008 **55.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
09 NOV - 4 PM 1:09



ROBERT B. BENNETT
WARREN K. SPONSLER
GWEN G. JACOBS
DAVID W. ADAMS

JOHN F. WENDEL
OF COUNSEL

KERRY J. ANDERSON
OF COUNSEL

JAN S. STOUT
ADMINISTRATOR

LISA S. DELVECCHIO
BRIAN R. EVANS
KAREN E. FERGUSON
KATHERINE M. GAVAGAN
ZACHARY J. GLASER
PATRICIA D. HAMILTON
KEVIN M. HAMMER
VANESSA J. JOHNSON
JANELLE G. KOREN
SAMANTHA P. LECLAIRE
MORGAN P. LYNCH
KIMBERLY ISNER MONTICELLO

November 3, 2009

Via Federal Express

Florida Department of State
Registration Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Global Ground Solutions, LLC – Articles of Amendment
Document No. L09000084186

Gentlemen:

Enclosed are the original and one copy of Articles of Amendment for Global Ground Solutions, LLC. Our check in the amount of \$55 is included to cover the cost of the filing fee and a certified copy.

Should you need any additional information to effectuate this filing, please contact my office. Thank you for your assistance and cooperation.

Very truly yours,

A handwritten signature in black ink, appearing to read "Lisa S. DelVecchio".

Lisa S. DelVecchio

/ldl
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Global Ground Solutions, 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:

Lisa S. DelVecchio
Name of Person

Sponsler, Bennett, Jacobs & Adams, P. A.
Firm/Company

Post Office Box 3300
Address

Tampa, FL 33601-3300
City/State and Zip Code

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

For further information concerning this matter, please call:

Linda D. Lee at (813) 272-1400, Ext. 141
Name of Person 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 Ground Solutions, 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 08-26-09 and assigned
Florida document number L09000084186.

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:

13943 Caden Glen Drive

(Principal office address MUST BE A STREET ADDRESS)

Hudson, FL 34669

Enter new mailing address, if applicable:

13943 Caden Glen Drive

(Mailing address MAY BE A POST OFFICE BOX)

Hudson, FL 34669

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:

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.

[Signature]
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>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

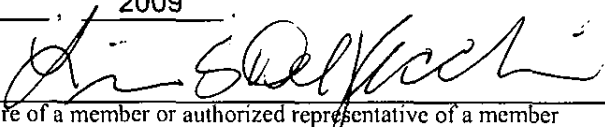
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

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

Add: Brian Lipsey
 Title: President
 Address: 13943 Caden Glen Drive, Hudson, FL 34699

Dated November 3 2009



 Signature of a member or authorized representative of a member
 Lisa S. DelVecchio

 Typed or printed name of signee