## · L09000088792

(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:  A. LUNT				
OCT <b>-5</b> -2010				
EXAMINER				
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10/04/10--01025--014 \*\*25.00



## **COVER LETTER**

TO:

Registration Section

Division of Corporations			
SUBJECT:		049 266	
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	ODED YEOSH	AUC	
		Name of Person	
	GLOBAL HORI	ZONS GROUP LL	2010 (SECO
	330) NE 1	St <u>AVE</u> #2610	SS
		Address	
	MIAMI, FL	33137 City/State and Zip Code	SECRETARY OF SHATE
	000000000000000000000000000000000000000	City/State and Zip Code	Ş™ <b>5</b>
	OVEDEGLOBAL!	FORIZONS GROUP. COM to be used for future annual report notifications.	ion)
For further information c	oncerning this matter, please of		,
ODED YEOS		at (954) 655-35	51
Name o	f Person	Area Code & Daytime T	elephone Number
Enclosed is a check for the	he 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)
Registi Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	ons er Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

GHGC	49 (()
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)
The Articles of Organization for this Limited Liability Com- Florida document number <u>L0900088792</u> .	pany were filed on 09/15/2009 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	l liability company here:
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	SSEC L F
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, enter the name of the news here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
<del></del>	City Zip Code
New Registered Agent's Signature, if changing Registered A	gent:

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.

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 OFER Grinderg 13/8 ☐ Add ☐ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Signature of a member or authorized representative of a member TLAN BAHRY
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00