

L09000104247

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP - 6 2013

T. HAMPTON

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HarborLight Global Capital Management, 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:

Jason P. Smith

Name of Person

HarborLight Global Capital Managment, LLC

Firm/Company

2502 Rocky Point Drive, Suite 230

Address

Tampa, FL 33607

City/State and Zip Code

jsmith@harborlightholdings.com

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

For further information concerning this matter, please call:

Jason P. Smith

Name of Person

at ( 813 ) 443-4913

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 22, 2013

RECEIVED  
13 SEP -5 PM 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JASON P SMITH \*\*\*\*\* 2ND MAILING \*\*\*\*\*  
% HARBORLIGHT GLOBAL CAPITAL MANAGEMENT  
2502 ROCKY POINT DR - STE 230  
TAMPA, FL 33607

SUBJECT: HARBORLIGHT GLOBAL CAPITAL MANAGEMENT, LLC  
Ref. Number: L09000104247

We have received your document for HARBORLIGHT GLOBAL CAPITAL MANAGEMENT, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 813A00018919



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2013

JASON P SMITH  
2502 ROCKY POINT DR  
STE 230  
TAMPA, FL 33607

SUBJECT: HARBORLIGHT GLOBAL CAPITAL MANAGEMENT, LLC  
Ref. Number: L09000104247

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Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 813A00018919

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

HarborLight Global Capital Managment, 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 Oct. 28, 2009 and assigned  
Florida document number L09000104247.

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)**

2502 Rocky Point Drive

Suite 230

Tampa, FL 33607

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

2502 Rocky Point Drive

Suite 230

Tampa, FL 33607

**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:

Jason P. Smith

New Registered Office Address:

2502 Rocky Point Drive, Suite 230

*Enter Florida street address*

Tampa

*City*

, Florida 33607

*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.*

*Jason P. Smith*  
If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE, FLORIDA

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>
MGRM	HarborLight Holdings, LLC	718 Shore Drive East	<input type="checkbox"/> Add
		Oldsmar, FL 34677	<input checked="" type="checkbox"/> Remove
MGRM	World Vision Investments, LLC	1725 Anglers Court	<input type="checkbox"/> Add
		Safety Harbor, FL 34695	<input checked="" type="checkbox"/> Remove
MGRM	Jason P. Smith	2502 Rocky Point Drive	<input checked="" type="checkbox"/> Add
		Suite 230	<input type="checkbox"/> Remove
		Tampa, FL 33607	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove

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TALLAHASSEE, FLORIDA

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Remove

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

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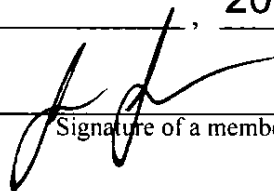
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Dated July 15, 2013



Signature of a member or authorized representative of a member

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA