

L10000014499

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

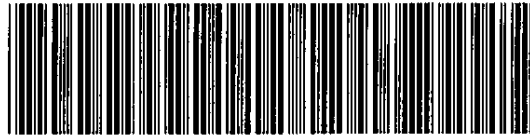
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500170963435

03/03/10--01015--011 **25.00

FILED
10 MAR -3 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Collins MAR - 4 2010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLOBAL Real Estate Advisors 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:

FAHRETTIN ERGEL

Name of Person

GLOBAL Real Estate Advisors LLC

Firm/Company

801 SOUTH OLIVE AVE #118

Address

WEST PALM BEACH FL. 33407

City/State and Zip Code

ERDEM38@hotmail.com

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

For further information concerning this matter, please call:

FAHRETTIN ERGEL

Name of Person

at (561) 820-8004

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**

FILED
10 MAR -3 PM 3: 02

GLOBAL REAL ESTATE ADVISORS, LLC STATE OF FLORIDA
(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 02-08-2010 and assigned Florida document number L10000014499

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)

801 SOUTH OLIVE AVE #118
WEST PALM BEACH FL 33401

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

801 SOUTH OLIVE AVE #118
WEST PALM BEACH FL 33401

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:

801 SOUTH OLIVE AVENUE #118
Enter Florida street address
WEST PALM BEACH, Florida 33401
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.

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

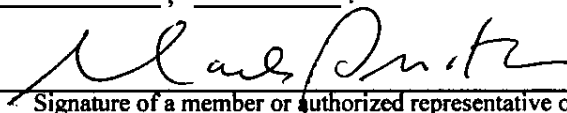
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ERGEL FAHRETTIN B	5600 N. FLAGLER DRIVE WEST PALM BEACH FL 33407	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	ALTNOK MUSTAFA	701 South Olive Ave # 1509 WEST PALM BEACH FL 33407	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	OZKURT, MEHMET	701 South Olive Ave # 1509 WEST PALM BEACH FL 33407	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	SMITH CHARLES S	3307 NW 29 AVENUE Boca Raton FL 33434	<input checked="" 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.)

FILED
10 MAR -3 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated FEBRUARY 27, 2010



Signature of a member or authorized representative of a member

CHARLES SMITH

Typed or printed name of signee