

L100000018065

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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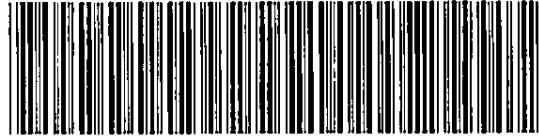
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Collier Global 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:

Arlan Bartling

Name of Person

Collier Global LLC

Firm/Company

6981 Lakewood Isle Drive

Address

Fort Myers, Florida 33908

City/State and Zip Code

Collier Global LLC

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

For further information concerning this matter, please call:

Arlan Bartling

239 634-4678
at (_____) _____

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

STATE OF FLORIDA
DIVISION OF CORPORATIONS

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

Collier Global 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 February 10, 2010 and assigned
Florida document number L10000018065.

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 contain 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)

6981 Lakewood Isle Drive

Fort Myrs, Florida 33908

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Arlan Bartling

New Registered Office Address:

6981 Lakewood Isle Drive

Enter Florida street address

Fort Myers

City

Florida

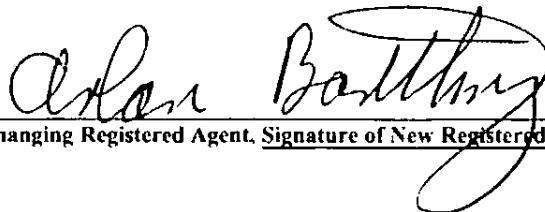
33908

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 605, 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



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STATE OF FLORIDA
FORT MYERS

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Arlan Bartling	6981 Lakewood Isle Dr. Fort Myers, FL. 33908	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Barbara Bartling	6981 Lakewood Isle Dr. Fort Myers, FL. 33908	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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OFFICE
TALLAHASSEE, FL 32301

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

Barbara Bartling (Death on April 14, 2024) Last Will & Testament bequeaths her 50% Ownership of Collier Global
to her (Husband). Arlan Bartling as MGM and AMBR now owns 100% of all assests of Collier Global LLC.

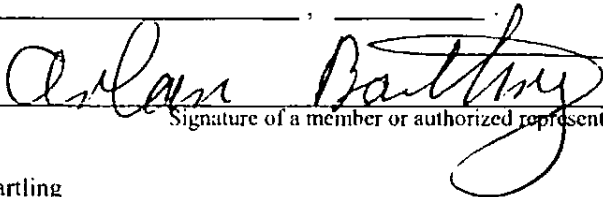
E. Effective date, if other than the date of filing: January 3, 2025 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after record is filed.

Dated January 3, 2025



Signature of a member or authorized representative of a member

Arlan Bartling

Typed or printed name of signer

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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