## L10000084048

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SECRETARY OF STATE

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EXAMINLA

## **COVER LETTER**

TO: Registration S Division of Co					
SUBJECT:	STRATE	GY GLOBAL LLC			
	Name of Lim	ited Liability Company			
	`				
The enclosed Articles of	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	ondence concerning this matte	r to the following:			
	· .				
	· · · · · · · · · · · · · · · · · · ·	Name of Person			
	ST	RATEGY GLOBAL LLC			
		Firm/Company			
		9753 66TH ST #382			
		Address			
	PIN	ELLAS PARK, FL 33782			
		City/State and Zip Code	<u>, , , , , , , , , , , , , , , , , , , </u>		
	E-mail address: (	to be used for future annual report no	tification)		
For further information	concerning this matter, please	call:		₹. 2	
_				2012 APR 23 SECRETARY ALLAHASS	
	Fim Hangge of Person	at ( 727 )	667-2386 me Telephone Number		******
Name	,	Alea Code & Dayii	me reteptione Number	L40	EDT THE
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 enclose	ed) Certified C	of status &	

**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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	EGY GLOBAL LLC		
( <u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appears Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Florida document numberL10000084098	Company were filed on	08/06/2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lir	nited liability company here	:	
The new name must be distinguishable and end with the we'L.L.C."	ords "Limited Liability Compan	y," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:		, <u>C</u>	
(Principal office address MUST BE A STREET ADD	PRESS)	<i>y</i>	20 mm
			Control Control
Enter new mailing address, if applicable:		T COX	F STATE
(Mailing address MAY BE A POST OFFICE BOX)		· \$	, ω 
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad		r records, <u>enter tl</u>	ne name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Ente	r Florida street addr	ess
		, 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.

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 **Address Type of Action** MGR OAKLEAF, KENDAL 9753 66TH ST #382 ☐ Add PINELLAS PARK FL 33782 ✓ Remove Remove ☐ Add Remove Add Remove □Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) 04-17 2012 Dated \_\_ Signature of a member of authorized representative of a member Tim Hangge

Page 2 of 2

Typed or printed name of signee

Filing Fee: \$25.00