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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAR 2 2-2011

EXAMINED

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: GHG 060 22C
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:
ODED YEOSHOUA
Name of Person
GLOBAL HORIZONS GROUP LLC Firm/Company
3301 NE 1 St AVE #2610
MIAMI, FL 33137 City/State and Zip Code
City/State and Zip Code
ODED@GLOBAL HORIZONSGROUP. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
ODED YEOSHOVA AVOHZOBY DEDC
Name of Person at (954) 655 - 3551 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \$30.00 Filing Fee & \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\ \$\
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

FILEU SECRETARY OF STATE DIVISION OF CORPORATIONS

11 MAR 21 AM 11:42

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GHG060 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 Sep. 14, 2010 and assigned Florida document number <u>L1000095821</u> .
his 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)
Inter new mailing address, if applicable:
Mailing address MAY BE A POST OFFICE BOX)
3. If amending the registered agent and/or registered office address on our records, enter the name of the new egistered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address:
Enter Florida street address
, 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 <u>Title</u> Name Address Type of Action ANGELA CARMEL HERRNSTADT PETERSBURG RD. MGRM Remove ENGLAND ☐ Add Remove \prod Λ dd Remove Add Remove \square Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Feb. 2011 20 Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00