

L10 000 113168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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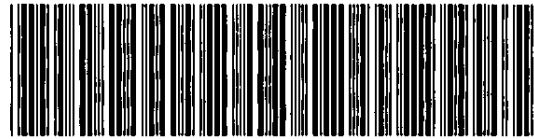
(Business Entity Name)

(Document Number)

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06/23/14--01043--017 **25.00

FILED
14 JUN 23 PM 3:34
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GLA SAT. COM 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:

Name of Person
Sunshine Accounting
Firm/Company
1925 E 4TH AVE #2
Address
Hiawatha FL 33010
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Flema Gomez at 305 888 87 86
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

GLASAT.COM 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 10/29/2010 and assigned
Florida document number L10000113168

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GLASAT.COM L.L.C.

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)

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:

MARIA ELENA CASTILLO

New Registered Office Address:

510 SW 51 Ave

Enter Florida street address

Miami

Florida

33134

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 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

MGR = Manager
AMBR = Authorized Member

MGR Teodora Pastorillo 510 SW 51 AVE ☐ Add
MIAMI FL 33124 ☒ Remove

MGR MAKIA ELENA CASTILLO 510 SW SI AVE ☒ Add
MIAMI FL 33134 ☐ Remove

☐ Add☐ Remove☐ Add☐ Remove☐ Add☐ Remove

 Add

☐ Remove

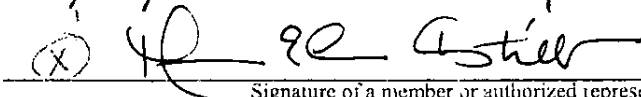
☐ Add
☐ Remove

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

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 06/18/2014, 2014.

(X) 

Signature of a member or authorized representative of a member

MARIA E CASTILLO

Typed or printed name of signee

14 JUN 23 PM 3:34
TALLAHASSEE, FLORIDA