L110000 33615

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DIVISION OF CURPORATION

THAMPION

COVER LETTER

Division of C	•				
SUBJECT:		G091 LLC			
	Name of Lim	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are sul	omitted for filing.			
Please return all corresp	pondence concerning this matter	to the following:			
	ODED YEOSHOUA				
		Name of Person			
GLOBAL HORIZONS GROUP LLC					
Firm/Company					
14 NE 1ST AVE STE 1111					
		Address			
		MIAMI FL 33132			
		City/State and Zip Code DED@GHG-INV.COM			
	ation)				
For further information	concerning this matter, please of	•	,		
ODED YEOSHOUA		ut ()	8553551		
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)	S60.00 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

FILEU
SECRETARY OF STATE
DIVISION OF CORPORATIONS

11 JUL 19 PM 12: 22

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	GHG091 LLC		
(Name of the Limited L (A I	iability Company as it now ap Torida Limited Liability Compar	pears on our records.) 1y)	
m		03/31/3011	
The Articles of Organization for this Limited Lial	• • •	03/21/2011	and assigned
Florida document numberL110000336	<u>515 </u>		
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of t	he limited liability company	here:	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Co	mpany," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applical	ble:		
(Principal office address MUST BE A STREET	ADDRESS)		
Enter new mailing address, if applicable:		/	
(Mailing address MAY BE A POST OFFICE B	ox)/	/	_
B. If amending the registered agent and/or	registered office address of	on our records, <u>enter t</u>	he name of the new
registered agent and/or the new registered offi	ce address here:		
Name of New Registered Agent:			
New Registered Office Address:	\		
		Enter Florida street add	ress
		, 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	JOAV ASHER NACHSHON	SDEROT HAORANIM 42 RAMAT EFAL ISRAEL	Add Remove
			Add Remove
			Add Remove
			Add Remove
			□Add □Remove
			Add Remove
D. If amendi	ing any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	SECRI JIVISION
			SECRETARY OF SIANSION OF CORPORA
			RATIONS 12: 22
Dated	JULY 03 , 20	<u>11 </u>	0,
-	Signature of a member	or authorized representative of a member	
	-	ILAN BAHRY	
		or printed name of signee	

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Filing Fee: \$25.00