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2091-113 FH 3: 10

R. WHITE JAN 1 5 2020

COVER LETTER

TO:

Registration Section
Division of Corporations

Bostor	Legal Consultants LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sul	omitted for filing.	
Please return all corr	respondence concerning this matter	to the following:	
	Jonathan Golden		
		Name of Person	
		Firm/Company	
	12707 49th Street North,	Suite 900	
	-	Address	
	Clearwater, FL 33762		
	jg@bostonfinancegroup.co	City/State and Zip Code	
	E-mail address:	(to be used for future annual report notif	ication)
For further informati	on concerning this matter, please of	call:	
Jonathan Golden		727 497-1661 at ()	
Na	me of Person	Area Code Daytime	e Telephone Number
Enclosed is a check	for the following amount:		
■ \$25.00 Filing Fe	ee \$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)
<u>Mailing Ad</u> Registrati	Idress: on Section	Street Address: Registration Sec	ction
Division	of Corporations	Division of Corp	porations
P.O. Box Tallahass	6327 ee, FL 32314	The Centre of To 2415 N. Monroe	allahassee e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2315 [73 13 FH 3: 18

Boston Legal Consultants

(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 <u>06/24/201</u>	and assigned
Florida document number L11000073790		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
Global Litigation Support LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation	on "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)		
Training dual con 1911 BETT 1 GOT GT 1 TGE BOTS		
		
B. If amending the registered agent and/or registered office a	ddress on our records,	enter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:	<u> </u>	
New Registered Office Address:		
New Registered Office Address.	Enter Florida stree	t address
		Florida
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre	e to act in this canaci	v I further garee to comply with the

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

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	Membe:

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□ Remove
			Change
			□Add
			□ Remove
			Change
			□Add
			□ Remove
			□ Change

ective date, if other than the date of filing:	
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The s filed.	90th day after the
December 11, 2019	
Signature of a member or authorized representative of a member	
Leo J. Govoni	

Filing Fee: \$25.00