#[11000117998

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



200213869072

11/03/11--01012--012 **30.00

11 110V -3 PM 4: 08

K. SALY EXAMINER

NOV 4 2011

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	GLOB	AL BRG LLC			
SOBOLE 1.		ited Liability Company			
	Amendment and fee(s) are sul				
Please return all correspond	ondence concerning this matter	to the following:			
MARIA F DIAZ					
Name of Person					
MARIA F DIAZ CPA					
Firm/Company					
		2250 NW 136 AVE			
		Address			
	PEM	BROKE PINES FL 33028			
	147.1	City/State and Zip Code			
	MDCPA@BELLSOUTH.NET E-mail address: (to be used for future annual report notification)				
For further information	concerning this matter, please c	·	nony		
ror further information (concerning this matter, please t	caii:			
	ARIA F DIAZ	ut \	99-2829		
Name o	of Person	Area Code & Daytime T	elephone Number		
Enclosed is a check for t	he 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)		
3.6 4.17	INC ADDRESS.	CTDEET/COUDIES	A DDDCCC.		

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



GLOBAL BRG 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 Lia	ibility Company were filed on	OCT 14 2011	and assigned
Florida document numberL110001179	998		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liability Comp	any," the designation "Ll	LC" or the abbreviation
Enter new principal offices address, if applica	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 agent and/or the new registered offi		our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:			<u> </u>
New Registered Office Address:	 		
	Enter Florida street address		
		, Florida	Zip Code
	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>	<u>Name</u>	Address	Type of Action
MGR	Daniel Milla de la Roca	2250 NW 136 AVE Pembroke Pines, Fl. 33028	Add Remove
			Add Remove
			Add Remove
D. If amendi 		e(s) here: (Attach additional sheets, if necessary.)	_
			_
			<u> </u>
Dated			
Ç		or authorized representative of a member or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00