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COVER LETTER

TO:	Registration Se Division of Cor			
		NATIONAL, LLC		
SUBJ	ECT:		ited Liability Company	
The er	iclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	endence concerning this matter	to the following:	
		MELINDA BARWICK		
			Name of Person	
		G2 INTERNATIONAL LI	LC	
			Firm/Company	
		625 N FLAGLER DRIVE.	SUITE 402	
			Address	
		WEST PALM BEACH, FI	_ 33418	
			City/State and Zip Code	
		SFISHER@PALMBEACH	RP.COM to be used for future annual report	notification)
For fu	rther information e	oncerning this matter, please ca	·	······································
MELI	NDA BARWICK		561 623-6211 at ()	
	Name o	f Person		time Telephone Number
Enclos	ed is a check for th	ne following amount:		
□ \$2	5.00 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)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section n of Corporations ox 6327 assec, FL 32314	STREET/COU Registration Se Division of Cor Clifton Buildin 2661 Executive	porations g

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G2 INTERNATIONAL, LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our recor- ted Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Comp	any were filed on 12/16/2011	and assigned
Florida document number L11000141180		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I.	iability Company," the designation "LLC	C" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	2	
		7
Enter new mailing address, if applicable:		A C
Mailing address MAY BE A POST OFFICE BOX)		S
	· · ·	
3. If amending the registered agent and/or registered		
egistered agent and/or the new registered office address	<u>here</u> :	9
Name of New Registered Agent:		
Name of New Registered Agent.		
New Registered Office Address:	Enter Florida street addre	ww
	a71	1
	, F)	lorida

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

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 Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	CHRISTOPHER GANNON	625 N. FLAGLER DRIVE, π402	■ Add
		WEST PALM BEACH, FL 33401	
			Change
MGR	BOLAY ENTERPRISES LLC	625 N. FLAGLER DRIVE, #402	
		WEST PALM BEACH, FL 33401	■ Remove
			☐ Change
	<u> </u>		
			Remove
			JG 2 of AM Invetor
			Change
			□ Add
			Remove
			□ Change
			Remove
			☐ Change

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ed Azgz		<i>}///</i> -	<i>√//</i> .					

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Filing Fee: \$25.00