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DIVISION OF CORPOSATIONS

## **COVER LETTER**

TO: ' Registration S Division of Co			
SUBJECT:	Global	Rambler, LLC	
		ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sul	bmitted for filing.	
Please return all corresp	oondence concerning this matter	r to the following:	2 S
	Nichole Beamer Name of Person		12 JUL 18 RM 1: 34
		Chad A. Walters, P.A. Firm/Company	
174 W. Comstock Avenue Ste. 100			
	V	Vinter Park, FL 32789	<u> </u>
	nbe E-mail address: (	City/State and Zip Code  amer@cwalterslaw.com  (to be used for future annual report notifi	ication)
For further information	concerning this matter, please of	call:	
	chole Beamer of Person	at ( 407 ) Area Code & Daytime	702-6635 e Telephone Number
Enclosed is a check for	_		
\$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)
Regis Divis P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n rations enter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



## Global Rambler, 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 Liz	• • •	2/2/2012	and assigned
Florida document numberL12000016			
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability company her	<u>e</u> :	
The new name must be distinguishable and end with "L.L.C."	h the words "Limited Liability Compa	ny," the designation "	LLC" or the abbreviation
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREET	T ADDRESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE I	<u></u>		
			****
B. If amending the registered agent and/o	or registered office address on o	our records, enter	the name of the new
registered agent and/or the new registered off			
Name of New Registered Agent:			
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, <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>	<u>Address</u>	Type of Action
MGRM	Elle Horne	4951 CASPIAN COURT ORLANDO EL 32819 US	Add Remove
<u>MGRM</u>	H. Leveta Horne, M.D.	4951 CASPIAN COURT ORLANDO EL 32819 US	Add Remove
			Add Remove
			Add Remove
			Add Remove
	<u></u>		Add Remove
D. If amend	ing any other information, ente	r change(s) here: (Attach additional sheets, if necessary.)	_
			_ _
	June 29	2012	<del>-</del> -
Dated	Signature of	member or authorized representative of a member	
		Chad A. Walters, Esq.  Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00