## h12000024886

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	<del></del>
(Ci	ty/State/Zip/Phone	<i>⇒</i> #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
<u></u>		

Office Use Only



600359827056

02/15/21--01006--019 \*\*25.80

RECEIVED FEB 1 2 2021

2621 FE3 12 AMII: 14

## **COVER LETTER**

rporations		
ational. LLC		
Name of Lim	ited Liability Company	<del></del>
Amondment and fee(s) are sub	mitted for filing	
•	<del>-</del>	
Address  SI Augustine, Florida 32080  Ciny/State and Zip Code  pb765@att.net  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  SI Augustine Fee & Certificate of Status  Certified Copy (additional copy is enclosed)  Street Address:  egistration Section  Registration Section  Division of Corporations  Name of Limited Liability Company  Paul Basso  Name of Person  Name of Person  Address  SI Augustine, Florida 32080  Ciny/State and Zip Code  pb765@att.net  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  SI Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)  Lialing Address:  egistration Section  Division of Corporations		
MECT:    Name of Limited Liability Company		
Global -National LLC		
	Firm/Company	
1965 ATA S #300		
	Address	<del></del>
St Augustine, Florida 3208	30	
	City/State and Zip Code	
		*******
	·	mication)
of Person		ne Telephone Number
he following amount:		
	Certified Copy	Certificate of Status & Certified Copy
<del></del>		ection
Corporations	Division of Co	rporations
	Amendment and fee(s) are subcondence concerning this matter  Paul Basso  Global -National LLC  1965 ATA S #300  St Augustine, Florida 3208  pb765@att.net  E-mail address: (concerning this matter, please concerning this matter concerning thi	Name of Limited Liability Company  Amendment and fee(s) are submitted for filing.  Independence concerning this matter to the following:  Paul Basso  Name of Person  Global -National LLC  Firm/Company  1965 ATA S #300  Address  St Augustine, Florida 32080  City/State and Zip Code pb765@att.net  E-mail address: (to be used for future annual report not concerning this matter, please call:  at (

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Global - National 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 Liability Company were filed on 02/21/2012	and assigned
Florida document number L12000024886	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office uddress MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	<del></del>
	<del></del>
<ol> <li>If amending the registered agent and/or registered office address on our records, enter the nare agent and/or the new registered office address here:</li> </ol>	ne of the new regi
	767
Name of New Registered Agent:	2021 FKB
	B
New Registered Office Address:  Enter Florida street address	<del></del>
, Florida, Florida	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 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 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>	Name	Address	Type of Action
MGR	Paul Pluchino		□Add
		115 Sunset Harbor Way #203 St Augustine. Fl 32080	) ≣Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
		<del></del>	□Add
			□Remove
			□ Change
<del></del>			□ Add
			□Remove
			□ Change
			□ Add
			□Remove
			□Change

Note: If the date inserted in the	he date of filing:  [Feb 10 2021]  (optional)  must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02  block does not meet the applicable statutory filing requirements, this date will not be listed to Department of State's records.	207 ( as t
e record specifies a delayed efferd is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the	he
Feb 10	2021	
Dated	<del></del>	
_		
Da	1 1 Dung	
- Can	Signature of a member or authorized representative of a member	