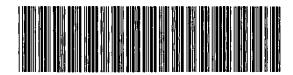
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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
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12 JUL 16 PH 12: 20
SECRETARY OF STATE

COVER LETTER

TO:	Registration Se Division of Cor						
SUBJI	ECT:	Global On	e Networks, LLC				
		Name of Limit	ted Liability Company				
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please	return all correspo	ndence concerning this matter	to the following:				
			Marion G. Peterson				
			Name of Person				
	Global One Networks, LLC						
Firm/Company							
	526 Cocoa Lane						
	Address						
	Orlando, FL 32804						
	City/State and Zip Code						
		marion@global1networks.com E-mail address: (to be used for future annual report notification)					
For fu	ther information c	oncerning this matter, please c	ali:				
	Mar	ion Peterson	at (62-1035			
	Name of Person Area Code & Daytime Telephone Numb			elephone Number			
Enclos	ed is a check for the	ne following amount:					
\$2:	5.00 Filing Fee	V\$80.00 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)			

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

FILED
12 JUL 16 PM 12: 20

GLOBAL ONE NETWORKS, LLGECRETARY OF STATE
(Name of the Limited Liability Company as it now appears on our records. AHASSEE, FLORIDA
(A Florida Limited Liability Company)

The Articles of Organization	for this Limited Liability Company we	ere filed on	02/22/2012	and assigned
Florida document number				
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liabilit	ty company here:		
The new name must be distingu "L.L.C."	ishable and end with the words "Limited	l Liability Company	y," the designation "L	LC" or the abbreviation
Enter new principal offices	address, if applicable:		-	
(Principal office address MU	ST BE A STREET ADDRESS)			· ·
	-			
Enter new mailing address,	if applicable:			
(Mailing address MAY BE A	POST OFFICE BOX)			
	ered agent and/or registered offic new registered office address here:	e address on ou	r records, <u>enter t</u>	he name of the new
Name of New Regis	stered Agent:	· · · · · · · · · · · · · · · · · · ·		_ .
New Registered Off	ice Address:			
		Enter Florida street address		
			, Florida	
	•	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

ï

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Marion G. Peterson	5956 Grand Coulee Rd. Orlando, FL 32810	Add Remove
<u>MGRM</u>	Valerie W. Mundy	526 Cocoa Lane Orlando, FL 32804	Add ✓ Remove
MGR_	Valerie W. Mundy	526 Cocoa Lane Orlando, FL 32804	✓ Add Remove
MGRM	Marion G. Peterson	526 Cocoa Lane Orlando, FL 32804	√ Add Remove
			Add Remove
			Add Remove
		hange(s) here: (Attach additional sheets, if necesse	FILED 12 JUL 16 PH 12: 20 SECRETARY OF STATE PALLIAMASSEE, FLORID
Dated	July 12 Signature of a me	2012 . ember or authorized representative of a member)A
		Valerie W. Mundy	
	T	yped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00