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Office Use Only



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2012 MAY -4 AMIL: 85
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05/04/12--01017--022 \*\*25.00

T. CLINE

MAY - 8 2012

**EXAMINER** 

### **COVER LETTER**

SUBJECT: Global Biologic LLC was filed missing the "S" after Biologic  Name of Limited Liability Company									
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.							
Please return all corresp	ondence concerning this matte	r to the following:							
		Michael J. Hatfield							
	Global Biologics LLC								
		Firm/Company							
		2500 Timberline Drive							
		Address							
	\	Winter Park, FL 32792							
		City/State and Zip Code							
	<u> </u>	njhatfield16@aol.com							
		to be used for future annual report	nonneation)						
For further information	concerning this matter, please	call:		SI SI					
	chael Hatfield	at (_863_)	528-5225	2012 MAY -4 AM 11: SECRETARY OF STA ALLAHASSEE, FLOR	~~				
Name	of Person	Arca Code & Da	ytime Telephone Number	TAR ASS					
				는 무 무 구 구	m				
Enclosed is a check for	the following amount:			FIGURE ST	Towns.				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is encl	osed) Certified C	of Status &					

#### MAILING ADDRESS:

Registration Section Division of Corporations

TO:

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	Biologic LL	<u>.C</u>		_	
(Name of the Limited Liability Co (A Florida Lin	ompany as it nov nited Liability Co	w appears on our recor moany)	<u>'ds.</u> )		
The Articles of Organization for this Limited Liability Com Florida document number		· _		assigne	d
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited	d liability comp	any here:			
Global I	Biologics LLC	;			
The new name must be distinguishable and end with the words "L.L.C."	"Limited Liability	y Company," the design	ation "LLC" or t	he abbre	viation
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDRES	SS)				
	<del></del>				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)	-				
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		ess on our records,	enter the nam	ie of th	e new
			-Eca	200	يهمرع الاد
Name of New Registered Agent:			HC AZ	<u> </u>	
New Registered Office Address:			SE	-4	
		Enter Florida str	eet address	<b>3</b>	111
		Flor	rida RE	9,	
	City	, 1101	SZIP C	ods.	

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 = MGRM	Manager , = Managing Member		
<u>Title</u>	Name	<u>Address</u>	Type of Action
			Add Remove
			Add Remove
			☐ Add ☐ Remove
			Add Remove
			Add Remove
D. If am	conding any other information enter o	change(s) here: (Attach additional sheets, if necessary)	Ada ve
D. Han		Change(s) nere: (Anach adamonal sheets, ly necessary.)	
			- -
Dated	April 27, Hay Signature of a man	2012 .	
	Signature of a what	rember or authorized representative of a member  Michael J Hatfield	
	<del></del>	Typed or printed name of signee	

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Filing Fee: \$25.00