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TO: • Registration Section

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Division of Corporations Global Impuls LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and feets) are submitted for tiling. Please return all correspondence concerning this matter to the following: Degrin Patterson Name of Person Firm/Company 1101 ME 2 Street Address Hallandale, FL 33009 City/State and Zip Code be used for future annual report notification)

Deann pso Gmail. Com For further information concerning this matter, please call: Deann Patterson Name of Person Enclosed is a check for the following amount: □ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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If Changing Registered Age	nt. Signature of New R	egistered Agent
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Page 1 of 3

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 Type of Action <u>Address</u> <u>Title</u> <u>Name</u> 1101 NE 2 Street _ 🗆 Add Hermann Seidl MGR Kennove **⊠** Remove Hallandale, FL 33009 ☐ Change 1101 NE 2 Street **⊠**≮Add Deann Patterson MGR add Hallandale, FL 33009 ☐ Remove ☐ Change □ Add ☐ Remove Changes TO Vqq C A Remaye _□ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change

D. If amending any other information, enter change(s	i) here: (Attach additional sheets, if necessary.)		
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E. Effective date, if other than the date of filing:(If an effective date is listed, the date must be specific and cannot	July 25, 2017 (optional)	irsuant to (505,0207 (3 _H b)
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Dated			
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Signature of a meny	or or authorized representative of a member		•
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	Page 3 of 3		
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