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SALLAHASSEE, FLOBIDA

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. COVER LETTER

TO:		sistration Sec ision of Corp				
CHD	JECT:	GLOBAL L	UNA LLC			
SUB	JEC I:		Name of Lin	ited Liability Company		
The e	enclosed	l Articles of A	Amendment and fee(s) are sub	mitted for filing		
			ndence concerning this matter	<u> </u>		
ricas	e return	an concespor	idence concerning this matter	to the following.		
			<u> </u>	Name of Person		
			Global	Luna LLC Firm/Company		SI (r
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			5846 5	Flamingo Rd #	\$ 520	FEB 27 AM 9: 43
						10
			(ouper	uty th 333	330	1 AM 9:
			l	City/State and Zip Code		± 3
			Parari. Hor (6) E-mail address: (City/State and Zip Code 2 gmail - Com to be used for future annual report not	ification)	`
For fi	urther in	formation co	ncerning this matter, please ca			
	Y05.	i Hare	1		8603	
		Name of	Person	Area Code Daytir	ne Telephone Number	
Enclo	sed is a	check for the	e following amount:			
= \$	25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee Certificate of Sta Certified Copy (additional copy is ea	atus &
		Registra	NG ADDRESS: tion Section	STREET/COUR Registration Secti	on	
		Division P.O. Box	of Corporations x 6327	Division of Corpo Clifton Building	prations	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLOBAL LUNA LLC			
(<u>Name of the Limited L</u> (A F	iability Company as it now appea lorida Limited Liability Company)	rs on our records.)	
(//1	Torida Eminica Endomity Company	1 1	
The Articles of Organization for this Limited Liabil	ity Company were filed on	11/02/2012	and assigned
Florida document number <u>L 1200013956</u>		1 1	
This amendment is submitted to amend the following	ng:		
A. If amending name, enter the new name of the	limited liability company h	ere:	
The new name must be distinguishable and contain the words	"Limited Liability Company." the	designation "LLC" or the abb	reviation "L.L.C."
Entan new principal offices address if analisable			
Enter new principal offices address, if applicable			: #\$ gr
<u>(Principal office address MUST BE A STREET A</u>	DDRESS)	 – – – – – – – – – – – – – – – –	
			开产
			82 835
Enter new mailing address, if applicable:			- Fig.
(Mailing address MAY BE A POST OFFICE BOX	r)		主 至少
Truming warress Will BE /11 OST OTTION BO.	<u> </u>		
			- 6 35
B. If amending the registered agent and/or i	registered office address or	n our records, enter t	he name of the nev
registered agent and/or the new registered office	•	e our records, <u>enter r</u>	ne name of the nev
-			
Name of New Registered Agent:			
Name of New Registered Agent.	, , , , , , , , , , , , , , , , , , ,		
New Registered Office Address:	r . r		<u>-</u>
	Enter Flo	rida 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 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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