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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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Division of Corporations

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April 22, 2020

ABDUJALIL RAZIKOV GLOBAL PARTNERS INVESTMENT GROUP LLC 12411 HOLLY JANE CT ORLANDO, FL 32824

SUBJECT: DM WORLD GROUP LLC

Ref. Number: L12000152060

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

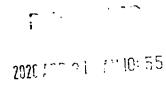
If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 420A00008396

Susan Tallent Regulatory Specialist II

www.sunbiz.org





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 24, 2020

ABDUJALIL RAZIKOV GLOBAL PARTNERS LOGISTICS LLC 12411 HOLLY JANE CT ORLANDO, FL 32824

SUBJECT: DM'WORLD GROUP LLC

Ref. Number: L12000152060

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The registered agent must sign accepting the designation.

THE NAME OF ONE OF THE AUTHORIZED PERSON LISTED IS NOT LEGIBLE. PLEASE AMEND ACCORDINGLY.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 020A00004090

COVER LETTER

TO: Registration Se Division of Cor			
	LD GROUP LLC		
SUBJECT:	Name of Lin	ited Liability Company	
T1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		tu ne en	
	Amendment and fee(s) are sub	, in the second	
Please return all correspo	indence concerning this matter	to the following:	
	ABDUJALIL RAZIKOV		
		Name of Person	
	GLOBAL PARTNERS IN	IVESTMENT GROUP LLC	
		Firm/Company	
	12411 HOLLY JANE CT		
		Address	
	ORLANDO .FL 32824		
		City/State and Zip Code	
	abdul@globalpartnersinves		· · · · · · · · · · · · · · · · · · ·
For further information c	e-mail address: (to be used for future annual report noti	fication)
ABDUJALIL RAZIKOV	•	540 7070000	
Name o	f Person	at () Area Code Daytim	e Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 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 Addres Registration 9	Section	<u>Street Address:</u> Registration Sec	
Division of C P.O. Box 632	•	Division of Cor The Centre of T	•
Tallahassee, l			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DM WORLD GROUP LLC				
(<u>Name of the Limited Liab</u> (A Flori	ility Compa da Limited	nv as it now appears Liability Company)	on our records.)	
ne Articles of Organization for this Limited Liability	Company	were filed on 12/0	05/2012	and assigned
orida document number 1.12000152060				
nis amendment is submitted to amend the following:				
If amending name, enter the new name of the lin	m <u>ited lia</u> b	ility company her	<u>'e</u> :	
OBAL PARTNERS INVESTMENT GROUP LLC				
e new name must be distinguishable and contain the words "L	imited Liabi	lity Company," the de	signation "LLC" or the abb	reviation "L.L.C."
nter new principal offices address, if applicable:		12411 HOLLY J	ANE CT	
Principal office address MUST BE A STREET ADDRESS)		ORLANDO FL	2824	
			-	20
iter new mailing address, if applicable:		12411 HOLLY J	ANE CT	2020 HAY
Mailing address MAY BE A POST OFFICE BOX)		ORLANDO FL 3	2824	
				AM 9:
If amending the registered agent and/or register ent and/or the new registered office address here		address on our re	cords, <u>enter the name</u>	- <u>.</u> -
Name of New Registered Agent: ABI	DUJALIL F	RAZIKOV		
New Registered Office Address: 124	11 HOLLY	JANE CT		
		Enter Flori	da street address	
ORI	.ANDO	FL_	Florida 328.	24
		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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ABDUJALIL RAZIKOV	12411 HOLLY JANE CT	= Add
		ORLANDO FL 32824	Remove
			Change
AMBR	DILRABO OBIDOVA	12411 HOLLY JANE CT	■Add
		ORLANDO FL 32824	□Remove
		 	
AMBR	ILESKHON TASHKHUZHAEV	11831 SIR WINSTON WAY	= Add
		ORLANDO FL 32824	□Remove
			Change
AMBR	VEYSEL OZGUL	8005 S ORANGE AVE	
		ORLANDO FL 32809	□Remove
			Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
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ffective date, if other than the data an effective date is listed, the date must bote: If the date inserted in this block becument's effective date on the Department.	e specific and cannot be prior k does not meet the applicate	to date of filing or more than able statutory filing requi	(optional) 90 days after filing.) Pursuant rements, this date will not	to 605.0207 (be listed as t
record specifies a delayed effective c is filed.	late, but not an effective ti	me, at 12:01 a.m. on the o	earlier of: (b) The 90th da	y after the
ited	2020	<u> </u>		
	(B)			
Si	gnature of a mymber or autho	orized representative of a me	mber	•
Abdu	/	a 2, kov	•	