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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Burch JAN 21 2014

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Global Business Networks, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adriana Suarez

Name of Person

Global Business Networks, LLC

Firm/Company

1321 SW 124 CT Unit A

Address

Miami FL 33184

City/State and Zip Code

a_suarezz@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adriana Suarez

Name of Person

786 518 8082

at (Area Code)

Daytime Telephone Number

Enclosed is a check for the 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 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

Global Business Networks, LLC

(A Florida Limited Liability Company)

N/A

N/A

N/A

N/A

N/A

Page 1 of 3

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Adriana Suarez	1321 SW 124CT Unit A	<input checked="" type="checkbox"/> Add
		Miami FL 33184	<input type="checkbox"/> Remove
MGR	Glen M. Spicer	12962 SW 29CT	<input checked="" type="checkbox"/> Add
		Miramar FL 33029	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated January 09, 2014

Asg

Signature of a member or authorized representative of a member

Adriana Suarez

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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