13000069281

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies _____ Certificates of Status ____ Special Instructions to Filing Officer:

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*LORETARY OF STATE
TAIL AHASSEE FLOSING

B. BOSTICK
SEP 1 0 2013
EXAMINER

COVER LETTER

Division of Corporations		
SUBJECT: 6/05al Energy Name or limite	Management LLC ed Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office add the EIN \$3007853022 Please return all correspondence concerning this management		Alson
JUAN CARLOS PAREDES Name of Person		
Global Energy Management		
Address	SEURL FORE	2013 SEP -9 PM 3: 04
Fort Landerdale, F1 330 City/State and Zip Code	916 SEE FLOR	9 PH 3: C
E-mail address: (to be used for future annual report notification	ion)	£
For further information concerning this matter, ple		
JUAN C. PAREDES at (FTY 2972606 Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following am	ount:	
№ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: 6 LOBAL	ENERRY MANAGEMENT LIC
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	ny: 1515 SE 17th St # 460508 Fort Conderdole, F1 33346
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Global Energy Maragement LLC RO. BOX 460508 Ft Ld, F1 33346
5-10-2013	L13000069281
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida Dept. of State:
Registered Agent:	Luis Saumell
Registered Office Address:	10290 NW 9St CIRCLE 414 MIAN FI 33172
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> :	EW Registered Office address: JUAN CARUS PAREDES
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1515 SE 17th St # 460508 FORT LANDERDALE FL 33846
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ider liability company, it is hereby confirmed that the change (sometiment that the change (sometiment)	Florida street address of the registered office ntical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote of vise provided in the articles of organization or
Signature of Registered Agent	ny has been notified in writing of this chänge.

Division-of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00