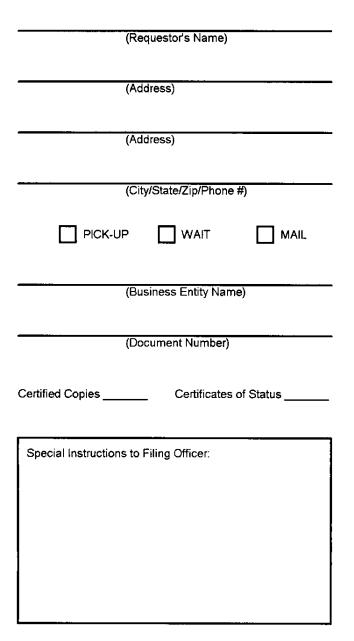
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TALLANDASSEATE OF TO

B. ROSTICK
DEC - 2 2013

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: GFS World 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:	
Anthony Laward Name of Person	
GFSworld	
Firm/Company	
1994 E Sunrise Blvd 223	
Ft havdordale, FL 33304	
City/State and Zip Code Globates info@amail. Lom E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Tara Mccoy at (888) 8U3-3803 Area Code & Daytime Telephone Number	
Number 1 courses Number 1 cour	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee U\$30.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	sed)

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GFSWOY	,0, 0	
(Name of the Limited Lin (A Fi	ability Company as it now appear orida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liabs Florida document numberL\ 30000793		31 2013 and assigned
This amendment is submitted to amend the following	ing:	
A. If amending name, enter the new name of th	e limited liability company her	<u>2</u> :
The new name must be distinguishable and end with the "L.L.C."	ne words 'Limited Liability Compai	ny," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	le:	الله الله الله الله الله الله الله الله
(Principal office address MUST BE A STREET A	ADDRESS)	
		m U
		3
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	E . 15
B. If amending the registered agent and/or registered agent and/or the new registered office		ur records, <u>enter the name of the nev</u>
Name of New Registered Agent:		
New Registered Office Address:		
-	Ent	er Florida 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. Ifurther 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 608, 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Karina Rakhimova	1994 E Sunrise Blud:	223 Add
		Ft. Lauderdoule, FL	Remove
		33304	_
MGKM	Dan Okan	1994 ESunrise Bluc	223 (Add
		Ft. Louderdale, FL	
		33304	_
			Add
			Remove
			(i) (i) (i) (i) (i) (i) (i) (i) (i) (i)
			10 15
			Remove
			_
			_ Add
			_ Remove
			Add
			_ Remove

. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
A Z	dding Dan Oran & Removing Karina Rakhimova-that is all.
ated	19 , 2013 . /
	Signature of a member or authorized representative of a member
	Typed or printed name of signee Page 3 of 3
	Filing Fee: \$25.00

Please email 610balfsinfo@gmail.com upon reciept.