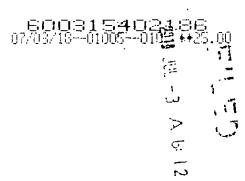
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(Requestor's Name)
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CORPORATION NAME(S) & DOCUMENT NUMBERS(S):

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New Filings
Profit
Non-Profit
Limited Liability
Other:

•	Amendments
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	Resignation
	Dissolution/Withdrawal
	Other:

 Other Filings
Annual Report
Fictitious Name
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 Other:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GLOBAL BUISNESS GROUP, LLC		<u>-</u>
(Name of the Limited Liability ((A Florida Li	Company as it now appears on our records.) miled Liability Company)	
The Articles of Organization for this Limited Liability Con	npany were filed on 08/01/2013	and assigned
Torida document number L13000108527		
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited</u>	d liability company here:	
he new name must be distinguishable and contain the words "Limited	I Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	 	
Principal office address MUST BE A STREET ADDRES	SS)	
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		المالية المالية
Enter new mailing address, if applicable:		 ف
Mailing address MAY BE A POST OFFICE BOX)		w ,ii
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 If amending the registered agent and/or register registered agent and/or the new registered office addres 		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
 	Enter Florida street address	
, <u></u>	, Flori	da
	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 Type of Action Address <u>Title</u> Name ____ Remove ☐ Change ☐ Remove Remove Change , > _⊟;Add 2 □ Remove _____ Change _____ 🗆 Add _____ Remove ____ Change _□ Add _□ Remove

ective date, if other than the date of filing: (optional) (optional) (interceptive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. (if the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records. (a) (interceptive date on the Department of State's records. (interceptive date on the Department of State's records.)	THE PURPOSE OF THE ENTITY WILL ANY AND LAWFUL BUSINESS	
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JUNE 25 (X) 2018	refective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 day : If the date inserted in this block does not meet the applicable statutory filing requirement ment's effective date on the Department of State's records.	ys after filing.) Pursuant to 605 ts, this date will not be liste
(x) Andrew Sie		:01 a.m. on the earlie
(x) A portion	JUNE 25 2018	
Signature of a member or authorized representative of a member	(x) Anomber	
ı	Signature of a member or authorized representative of a member	