## L14000018973

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special instructions to 1 mily Officer.

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## **COVER LETTER**

TO: Registration S Division of Co		
	Group LLC	
SUBJECT:	Name of Lin	aited Liability Company
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.
Please return all corresp	ondence concerning this matter	to the following:
	Kimberly Benford	
		Name of Person
	Opulence Group LLC	
		Firm/Company
	1296 Francis Ave	
		Address
	Orlando Florida 32806	
	-	City/State and Zip Code
	kimberly.benford@yahoo.c	om to be used for future annual report notification)
For further information	concerning this matter, please e	
	oonoonang una muuon prouse e	678 778-2920
Name	of Person	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 & ☐ \$60.00 Filing Fee. Certified Copy (additional copy is enclosed)  ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration	Section	Street Address: Registration Section
Division of O P.O. Box 63		Division of Corporations The Centre of Tallahassee
Tallahassee,		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Opulence Group LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited L Florida document number <u>L14000018973</u>		were filed on <u>02/04/2014</u>	and assigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name of	f the limited liab	oility company here:	
Global Enterprise Network, LLC			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		1296 Francis Ave	
(Principal office address MUST BE A STREE		Orlando, FL 32806	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE			
B. If amending the registered agent and/or ragent and/or the new registered office addre			ne of the new registered
	1296 Francis A	7/4	1 1
New Registered Office Address:	1270 Francis A	Enter Florida street address	
	Orlando	, Florida <sup>32</sup>	, 🕮 🛌
		City	Zip Code =
New Registered Agent's Signature if changing l	Quaistored Apont.		·•

## 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 addedor removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
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		<del> </del>	□Remove
			□Change
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			Change
			□Add
			□Remove
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If an effective date is liste  Note: If the date inser	ner than the date of filing, the date must be specific a red in this block does no date on the Department of	and cannot be prior to it meet the applicab	date of filing or more than le statutory filing requi	(optional) n 90 days after filing.) Pursua irements, this date will no	ant to 605.0207 (3 ot be listed as th
e record specifies a del rd is filed.	layed effective date, but n	not an effective time	e, at 12:01 a.m. on the	earlier of: (b) The 90th	day after the
		2022			
Dated					
Dated November 1	Signatura of	a member or authorize	red representative of a me	rmher	<del></del>

Filing Fee: \$25.00