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S. WARREN

AUG 24 2017

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GLOBAL SIGNAL 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:

SONIA BOTERO

\_\_\_\_\_  
Name of Person

JP GLOBAL BUSINESS SOLUTIONS INC

\_\_\_\_\_  
Firm/Company

1395 BRICKELL AVE SUITE 1380

\_\_\_\_\_  
Address

MIAMI FL 33131

\_\_\_\_\_  
City/State and Zip Code

MASTER@JPGBUSINESS.COM

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

For further information concerning this matter, please call:

JULIO MONTEZUMA

305 30593700  
at ( )

\_\_\_\_\_  
Name of Person

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

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	VELASQUEZ, HAISKALEM	10402 SW 3RD ST APT C	<input checked="" type="checkbox"/> Add
		SAINT PETERSBURG FL 33716	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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17 AUG 2017 11:57 AM  
 STATE OF FLORIDA  
 DEPARTMENT OF REVENUE  
 TALLAHASSEE, FLORIDA

[illegible]

08/14/2017

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated AUGUST 14 2017

GUST 14

Signature of a member or authorized representative of a member

JULIO MOTEZUMA MGR

Typed or printed name of signee

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FLORIDA