7/24/22, 7.23 PM

Division of Corporations



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(((H22000250559 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : JP GLOBAL BUSINESS

Account Number : I20130000083 Phone : (305)359-3700

Fax Number : (786)217-1243

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

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Tallahassee, FL 32314

		•	COVER LETTER	en ja
TO:	Registration Se Division of Cor		•	(H22000250559 3,
			DON BRILLC	
SUBJ	JECT:	Name of Lim	ited Liability Company	
The e	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
			SONIA BOTERO	
			Name of Person	
		л ^р GLOBAI	BUSINESS SOLUTIONS INC	
			Firm/Company	
		1395 [BRICKELL AVE STE 800	
			Address	
			MIAMI, FL 33131	
			City/State and Zip Code	,
			TER@JPGBUSINESS.COM to be used for future annual report r	outestion)
For fu	irther information c	oncerning this matter, please c		
	SONIA H	OTERO	305 359-370	00
	Name o	f Person	Area Code Day	time Telephone Number
Enclo	osed is a check for th	ne following amount:		
≓ \$	25.00 Filing Fee	(1) \$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 Addres	:5:	Street Address	:
	Registration S	Section	Registration	Section
	Division of C P.O. Box 632		Division of C	Torporations f Tallahassee
	P.O. BOX 032	. 1	THE CHINE O	1 1 01101102266

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

(H22000250559 3) ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Company as it now appears on (A Florada Limited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Company were filed on	4/16/2014	and assigned
Florida document numberL14000062602		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability company here:		
The new name must be distinguishable and contain the words "Limited Liability Company," the design	nation "L.I.C" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		······
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
	<u> </u>	
B. If amending the registered agent and/or registered office address on our recor	ds, enter the nam	e of the new-registered
agent and/or the new registered office address here:		122
Name of New Registered Agent:		
New Registered Office Address:		
Enter Florida s	rreet address	
	, Florida	
Cin		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.

(H22000250559 3)

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

Zitis	Same	Address	Type of Action
MGR	LARISSA VIEITAS RODRIGUES	1395 BRICKELL AVE STE 800	_ □Add
		MIAMI, FL 33131	_ ≅ Remove
			Change
AMBR	TASHMARINE SERVICES LTD.	TORTOLA PIER PARK, BUILDING 1, 2ND FLOO	R ≣Add
		WICKHAMS CAY 1, ROAD TOWN	_ □Remove
		TORTOLA, BRITISH VIRGIN ISLANDS	_ EChange
AMBR	ALESSANDRO BRONZE TONIZA	1395 BRICKELL AVE STE 800	_ ≅ Add
		MIAMI, FL 33131	_ ⊡Remove
			_ DChange
			🗆 Add
			□Remove
			_ Change
			🗆 Add
			🗆 Remove
			_ 🗆 Add
			□Remove
			Change

	(H22000250559 3)
If amending any ot	her information, enter change(s) here: (Attach additional sheets, if necessary.)
	
<u> </u>	
	
	
	
Effective date, if ot	her than the date of filing: (optional)
If an effective date is list	ted, the date must be specific and cannot be prior to date of filing or more than 90 days after filling.) Pursuant to 605 0207 (
	erted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
BOCUMENT S CHECUVE	uale of the Department of State A records.
	and the second s
e record specifies a de rd is filed.	clayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
id is rined.	
	July 21st 2022
Dated	···
	punalten
	Signature of a member or authorized representative of a member
	organizate or a manager or manager consequence of the manager
	LARISSA VIEITAS RODRIGUES
	Typed or printed name of signee